

New AAP Consensus Statement on Mucogingival Conditions

Soft tissue grafting procedures are utilized to create or augment the attached gingiva, deepen the vestibule, or eliminate frenum involvement. These reconstructive procedures reestablish health by stopping progressive gingival recession and providing gingival coverage of caries-susceptible and sensitive root surfaces.

A number of evidence-based studies have demonstrated the efficacy of several procedures in accomplishing these goals, but periodontists have been aware that no such studies provide guidance when considering when to perform them. Factors such as tooth position, frenum insertions, vestibular depth, amount of attached gingiva, gingival inflammation, and the need for orthodontic or restorative care must be part of the treatment planning process.

As an aid in decision making, the Academy convened a panel of recognized experts in the treatment of mucogingival problems to develop a consensus statement on criteria for determining the need for reconstructive surgery. Members of the panel were Drs. Edward (Pat) Allen, John Bruno, Gary Maynard, P.D. Miller, and Kevin Murphy with S. Jerome Zackin as chairman.

According to Dr. Zackin, who also serves as the Academy's insurance consultant, "The Patient Benefit and Advisory Committee and the Board of Trustees recognized that some of the criteria for treatment of mucogingival conditions could not be quantified and other important factors must be considered. This consensus statement should aid our members in determining the need for treatment of their patients."

He added, "We hope the statement also will be utilized by third party carriers as they develop reimbursement policies related to treatment of mucogingival conditions. Its acceptance by all parties will benefit the health of the people they insure - our patients."

See full statement in the box at the right, and also here: perio.org/members/tpn/policy/policy18.html.

Consensus Statement on Mucogingival Conditions

This paper was developed by experts in the field and approved by the AAP Board of Trustees in May 2009.

The 2000 American Academy of Periodontology Parameters of Care defined mucogingival conditions as "deviations from the normal anatomic relationship between the gingival margin and the mucogingival junction." This relationship may be affected by tooth position, frenum insertion, and vestibular depth. The most common manifestations are gingival recession and associated loss of supporting bone, absence or reduction of keratinized tissue, and probing depths extending beyond the mucogingival junction. This mucogingival pathology often results in root sensitivity, loss of tooth structure (abrasion), increased length of the clinical crown, and inflammation and bleeding of the marginal tissue.

Most adults have some form of a mucogingival pathosis. There are a number of evidence-based procedures available to predictably correct these anatomic abnormalities and pathoses. However, there is disagreement on criteria for determining the need for that treatment. The decision whether or not to treat a particular patient involves consideration of the factors noted above plus the need for orthodontic or restorative care.

In the absence of evidence-based studies to determine the need for treatment, clinical practice guidelines are used in a number of health care disciplines. These guidelines should be based upon explicit criteria to ensure consensus regarding their validity. However, it must be remembered that the use of guidelines must always be in the context of a dentist's best clinical judgment in the care of a particular patient. It is the patient, together with his or her dentist, who has the final responsibility for making treatment decisions after all therapeutic options have been explained and carefully considered.

In presenting those options to the patient, consideration must be given to:

- 2 mm or more of gingival recession with inadequate keratinized tissue*
- Less than 1 mm of attached gingiva
- Root abrasion
- Class V caries or defective restorations
- Aberrant frenum attachment
- Inability to maintain the marginal tissue in periodontal health** with atraumatic plaque removal techniques using a manual or mechanical toothbrush with soft bristles
- Orthodontics - planned, in progress, or completed
- Need for restorative care of the tooth
- Progression of recession
- Root sensitivity
- Age of patient
- Presence of periodontitis
- Abnormal tooth position relative to the alveolar ridge

It is important to emphasize that the amounts of gingival recession and attached gingiva should not be the sole determinants of the need for treatment of mucogingival pathology.

*Inadequate keratinized tissue is defined as <2 mm in width of which less than 1 mm is attached gingiva

** Periodontal health is defined as minimal probing depth with no bleeding or inflammation