

# Gingival Bleeding

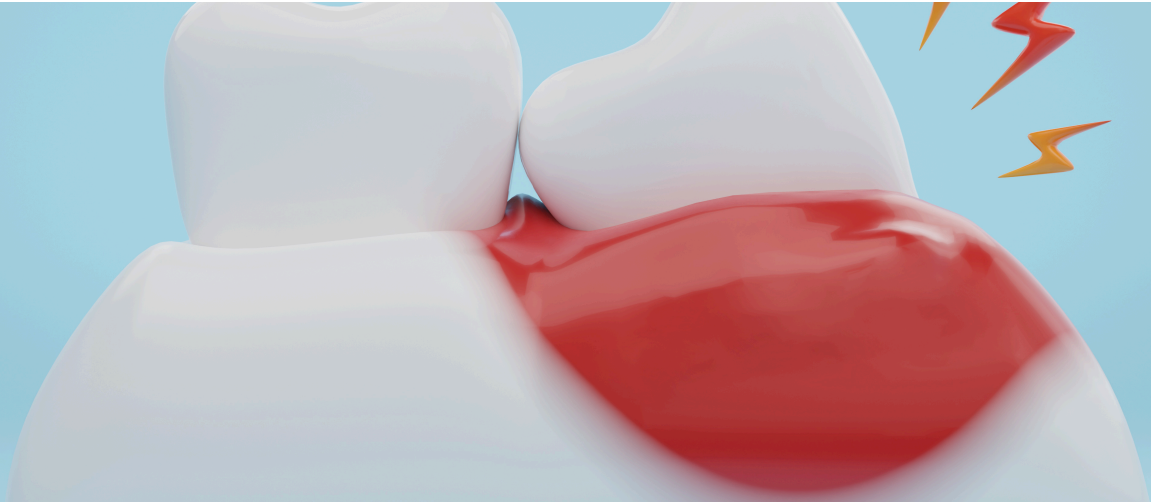


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Presented by  
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# Introduction of **Bleeding**

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## **Measuring Gingival Bleeding**

Gingival bleeding traditionally is accepted as an objective clinical sign of inflammation and is typically measured as either 'present' or 'absent'. Patients may present with tobacco habits that may suppress bleeding or high dose use of blood thinners which may increase bleeding.

While bleeding on probing is a traditional method for assessing gingival bleeding, many clinicians observe bleeding during other parts of the dental appointment, such as brushing or scaling. These instances are also valuable indicators of gingival health and should be considered when evaluating the presence and severity of inflammation.

## **Modalities for Eliciting a Bleeding Response**

### **Stimulation**

Stroking or stimulating the lining of the sulcus to assess proximal bleeding; achieved with toothpicks, dental floss, plastic wedges or brushes.



### **Probing**

The insertion of a periodontal probe can cause laceration [too firm of pressure] or can indicate ulceration [inflammation from the connective tissue]. Bleeding coming from a pocket during periodontal probing indicates a deeper inflammatory involvement.



# Understanding Bleeding

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Gingival bleeding can present with varying onset, from rapid to delayed, and can range from pinpoint bleeding to heavy flow. Activities like brushing, flossing, or probing during a dental exam may elicit a bleeding response, indicating inflammation or other periodontal issues. The clinician's technique is crucial in assessing the severity and cause of bleeding, as well as for therapeutic instrumentation. Proper probing technique, pressure, and instrumentation can minimize trauma and provide accurate diagnosis, ensuring appropriate treatment for the underlying conditions causing the bleeding. This helps in effective periodontal management and promotes better long-term oral health outcomes.

The observation of gingival bleeding demonstrates ulceration of the sulcular epithelium, a **chronic oral wound**. These oral wounds [or ulcerations] are considered to be persistent lesions in the mouth that fail to heal within a normal timeframe. Chronic oral wounds are ulcerations that present as open, weeping sores, signaling that the mucosa is compromised. These persistent lesions indicate **infection within the tissue** where bacteria thrive, preventing proper healing and often leading to discomfort, inflammation, and further complications if untreated.

An applied force greater than **25g** can cause healthy sites to bleed.



Periodontal debridement has reduced bleeding in

**57%**  
of sites.



While periodontal debridement has been shown to reduce bleeding in a large portion of active infection sites, **the treatment of oral wounds may include therapy beyond debridement of plaque retentive sites of the hard tissue, and delivering care to the open, weeping wounds of the soft tissues.**

The objective of periodontal therapy is to both address active infection & inflammation and move the disease activity into a state of remission. A continuous lack of bleeding upon stimulation is a highly accurate predictor of stable activity of disease and thus no further periodontal damage.



# BLEEDING Analysis



While the presence or absence of gingival bleeding is typically measured, **the concentration and quality of bleeding are also crucial factors in complex assessments.** Heavy or profuse bleeding, as well as prolonged bleeding, may indicate more severe inflammation or underlying conditions requiring further evaluation and tailored periodontal treatment.

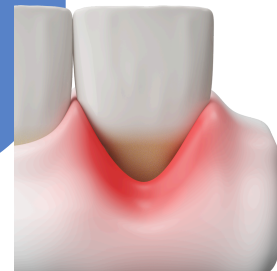
## Spontaneous

Bleeding from the gingiva that occurs without external stimulation, such as brushing or probing, often indicating advanced periodontal disease or other underlying oral health issues. Prudent attention and swift therapy is warranted.



## Pinpoint

Although perhaps minimal, this localized bleeding from the gingiva indicates the earliest identifier of a gingival wound. In this state, early and definitive therapy is well warranted. Definitive therapy includes various therapies designed to fully resolve the inflammation condition.



## Delayed

Occurs after a time lag following mechanical stimulation, such as probing or subgingival scaling. It may indicate deeper inflammation or tissue damage that is not immediately visible upon initial contact.



## Healthy

According to the American Academy of Periodontology, healthy gingiva is defined as having less than 10% of sites in the mouth showing bleeding. Bleeding beyond this threshold suggests periodontal inflammation.



Though bleeding is an objective indicator of oral disease, a prudent clinician must assess the patient's overall complexity and risk factors. This comprehensive evaluation ensures accurate diagnosis and personalized treatment tailored to the patient's unique oral health needs.



# Thank You

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