

Descriptive Statistics

	N	Minimum	Maximum	Mean	Std. Deviation
AGE	100	23	80	47.86	13.353
Valid N (listwise)	100				

11.8% of the population that participated for the study came for scaling to a dental clinic . 24.5% of the population visiting a dental clinic came for extraction . 5% of the patients came for fixed partial denture treatment . 1% of the population crisis the clinic for implant placement . 16.3% of the population visits for treatment of periodontitis . 8.2% of the people that took part in the study had come for treatment of root canal treatment. 8.2% of the population came for restoration .

DISCUSSION:

The mechanism of diabetes correlation with periodontitis primarily involves vascular changes, neutrophilic dysfunction, impaired collagen synthesis and genetic predisposition. It is known that diabetes induces vascular changes in all tissues, including capillaries of periodontal structures(2). Gingival capillaries undergo basal membrane thickening, however, other pathologic changes such as membrane disruption, intro membranous presence of collagen and oedematous endothelium may also be observed. These changes have been postulated to impair leukocyte migration, immune factor activities and thus contributing to progression of periodontitis and tooth loss by disordered microcirculation in diabetes(3).

There's is a strong relationship existing between diabetes and periodontics. Diabetes is considered to be a risk factor for periodontal diseases. Gingivitis often progresses disease does affect those individuals who do not have diabetes, but diabetics are especially prone to developing these conditions due to sugar imbalances in the body that promote bacteria growth into periodontitis if left untreated. Slow circulation of the blood,Decreased immune system – the decrease in white blood cells results in a reduced ability to fight off infectious bacteria,High glucose levels connected to diabetes are in the blood and saliva. The bacteria leading to Periodontal disease thrive and multiply on sugar,Smoking and xerostomia contributes to the relationship between periodontal diseases and diabetics. Several studies have reported that periodontal therapy results in improved glycemic control in some individuals with diabetes(4). Diabetes mellitus affects negatively the periodontal health leading to gingivitis,periodontitis and tooth loss(5).

CONCLUSION:

Prevention is better than cure. So it is necessary for everyone of us to maintain the blood sugar level so that diabetes can be prevented. Good health is integral to general health. It is always necessary to pay attention to diabetes mellitus. Diabetes affects many major organs like heart,blood vessels,nerves,eyes,and kidney. It is a must to take care of our body and treat it right so that it can be good to us in return.

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