

Letter to the Editor

Response

Jones JA. Response. J Clin Periodontol 2007; 34: 460. doi:10.1111/j.1600-051X. 2007.01088.x.

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Dear Editor,

I am pleased to have the opportunity to respond to the concerns of my distinguished longtime VA colleague, Dr. Friedlander (2007), a lifelong scholar in the area of oral-systemic relationships, regarding the articles, "Does Periodontal Care Improve Glycemic Control? The Department of Veterans Affairs Dental Diabetes Study" and "Study Design, Recruitment, and Baseline Characteristics: The Department of Veterans Affairs Dental Diabetes Study" (Jones et al. 2007a, b). It is quite plausible that the relationship between periodontal infection and glycemic control could be stronger in persons with advanced periodontal disease. In the VA Dental Diabetes Study, we tested the efficacy of non-surgical periodontal therapy, including oral and topical antimicrobials, on the improvement of blood sugar control as measured by HbA1c over periods of 4 and 12 months. In our study, we purposely excluded individuals with gross dental infection of the type that Dr. Friedlander describes. We agree that doing this likely biased our results to the null and that diabetics with a greater burden of oral infection may have responded to periodontal therapy with greater improvements in glycemic control. That being said, I know we can agree that there clearly remains room for future *randomized*, multicenter studies including participants with higher disease levels and ones in which we also measure systemic inflammatory markers.

References

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C., Rothendler, J. A. & Garcia, R. I. (2007a)
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