

Glossary of Periodontal Terms

2001
4th Edition

THE AMERICAN ACADEMY OF PERIODONTOLOGY



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4th Edition

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Chicago, Illinois 60611-2690

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ISBN 0-9264699-3-9

The first two editions of this publication were published under the title *Glossary of Periodontic Terms* as supplements to the *Journal of Periodontology*. First edition, January 1977 (Volume 48); second edition, November 1986 (Volume 57). The third edition was published under the title *Glossary of Periodontal Terms* in 1992.

ACKNOWLEDGMENTS

The fourth edition of the *Glossary of Periodontal Terms* represents four years of intensive work by many members of the Academy who generously contributed their time and knowledge to its development. This edition incorporates revised definitions of periodontal terms that were introduced at the 1996 World Workshop in Periodontics, as well as at the 1999 International Workshop for a Classification of Periodontal Diseases and Conditions. A review of the classification system from the 1999 Workshop has been included as an Appendix to the *Glossary*.

Particular recognition is given to the members of the Subcommittee to Revise the Glossary of Periodontic Terms (Drs. Robert E. Cohen, Chair; Angelo Mariotti; Michael Rethman; and S. Jerome Zackin) who developed the revised material.

Under the direction of Dr. Robert E. Cohen, the Committee on Research, Science and Therapy (Drs. David L. Cochran, Chair; Timothy Blieden; Otis J. Bouwsma; Robert E. Cohen; Petros Damoulis; Connie Drisko; James B. Fine; Gary Greenstein; James E. Hinrichs; Martha J. Somerman; Vincent J. Iacono, Board Liaison; and Robert J. Genco, Consultant), as well as Drs. Sigmund Socransky and Henry Greenwell, served as peer reviewers for this edition of the *Glossary*.

A

ABERRANT: Varying or deviating from the usual or normal course, form, or location.

ABFRACTION: Hypothetical tooth surface abrasion in conjunction with occlusal forces; data supporting this term as a discrete clinical entity are not yet available (*See* Abrasion; Erosion.)

ABRASION: Wearing away of a substance or structure through an abnormal mechanical process. Examples include gingival and dental abrasions due to incorrect brushing.

ABSCESS: Localized collection of purulent exudate (pus) in a cavity formed by the disintegration of tissues.

ACUTE A.: An abscess of relative short duration, typically producing pain and local inflammation.

APICAL A.: Inflammatory condition characterized by formation of purulent exudate involving the dental pulp or pulpal remnants and the tissues surrounding the apex of a tooth.

CHRONIC A.: 1. Abscess of comparatively slow development with little evidence of inflammation. There may be an intermittent discharge of purulent matter. 2. Long-standing collection of purulent exudate. It may follow an acute abscess. *See:* Abscess, Residual.

GINGIVAL A.: A localized purulent infection that involves the marginal gingiva or interdental papilla.

PERICORONAL A.: A localized purulent infection within the tissue surrounding the crown of a partially erupted tooth.

PERIODONTAL A. (Parietal A.): Localized purulent inflammation in the periodontal tissues; also called lateral periodontal abscess.

PULPAL A.: Inflammation of the dental pulp characterized by the formation of purulent exudate.

RESIDUAL A.: Abscess produced by the residues of a previous inflammatory process.

WANDERING A.: Abscess in which purulent material flows along a course of decreased resistance and discharges at a distant point.

ABSORPTION: 1. Passage of a substance into the interior of another substance. 2. Passage of fluids or substances through tissues. 3. Attenuation of radiation energy by the substance through which it passes.

ABUTMENT: Tooth, root, or implant used to support and/or anchor a fixed or removable prosthesis.

INTERMEDIATE A.: Abutment located between other abutments.

ACANTHOLYSIS: Dissolution of the intercellular attachments within the prickle cell layer (stratum spinosum) of stratified squamous epithelium. Classically seen in pemphigus vulgaris during vesicle and bulla formation.

ACANTHOSIS: Hyperplasia of the prickle cell layer (stratum spinosum) of stratified squamous epithelium, resulting in thickened rete ridges or widening of this layer.

ACATALASIA (Acatlasemia): Deficiency in the blood and tissues of the enzyme catalase, sometimes resulting in oral ulceration and destruction of alveolar bone.

ACCRETION: Accumulation on the teeth of foreign materials such as plaque, materia alba, and calculus.

ACELLULAR: Lacking in cells.

ACHE: Any dull, continuous pain. Thought to be the psychological manifestation of c-fiber (slow, non-myelinated) nociceptive impulses with origin outside the central nervous system.

ACQUIRED: Not congenital, but attained after birth. Examples include acquired immunodeficiency syndrome (*See* AIDS), acquired immunity and acquired reflexes.

ACQUIRED CENTRIC: *See:* Occlusion, Centric

ACQUIRED IMMUNE DEFICIENCY SYNDROME: *See:* AIDS.

ACTINOBACILLUS ACTINOMYCETEMCOMITANS: Small, Gram-negative, non-motile, facultatively anaerobic, rod-shaped bacteria found in subgingival and marginal plaque. A periodontal pathogen implicated in some forms of periodontitis. Linked most often with the aggressive periodontal diseases.

ACTINOMYCES ISRAELII: Gram-positive, non-motile, non-acid fast, non-spore forming, anaerobic bacilli with a tendency to grow as branched filaments in tissues. Commensals that usually coexist peacefully with their hosts, but under some conditions emerge as opportunistic pathogens involved in infections of both soft tissues and teeth.

ACTINOMYCES NAESLUNDII: Gram-positive, non-motile, anaerobic bacteria that preferentially colonize the tongue and other mucosal surfaces; can also colonize the oral cavity prior to tooth eruption.

ACTINOMYCES VISCOSUS: Gram-positive, non-motile, facultatively anaerobic, filamentous, pleomorphic bacteria that form branched filaments. These indigenous microflora colonize the mouths of humans and other animals and are associated with gingivitis, periodontitis, and root caries.

ACTINOMYCOSIS: Clinical infection caused by a species of the genus *Actinomyces*. Abscess formation is common and, in the cervicofacial form of the disease, usually drains to the skin surface.

ACUTE: 1. Sharp, severe. 2. Denoting the swift onset and course of a disease.

ACUTE NECROTIZING ULCERATIVE GINGIVITIS (ANUG): *See:* Periodontitis, Necrotizing Ulcerative.

ACUTE NECROTIZING ULCERATIVE PERIODONTITIS (ANUP): *See:* Periodontitis, Necrotizing Ulcerative.

ACYCLOVIR: A synthetic acyclic purine nucleoside with selective antiviral activity against many, but not all, herpes viruses.

ADENITIS: Inflammation of a lymph node or gland.

ADENOPATHY: Pathologic enlargement of glands, especially lymphatic glands.

ADENOVIRUS: A DNA virus 80 to 90 nanometers in size. It can cause respiratory illness and conjunctivitis in humans. Human adenoviruses comprise at least 31 serotypes that can be divided into three groups on the basis of oncogenicity.

ADHERENCE: The act or quality of uniting two or more surfaces or parts.

ADHESION: The property of remaining in close proximity; the molecular attraction existing between the surfaces of contacting bodies.

ADJUSTMENT, OCCLUSAL: *See:* Occlusal Adjustment.

ADJUNCTIVE TREATMENT: Supplementary and additional therapeutic procedures. In periodontics, it generally refers to procedures other than scaling and

root planing and surgical therapy, such as chemotherapy, occlusal therapy, and restorative care.

ADSORPTION: The attachment of a substance to the surface of another.

AEROBE: A microorganism that can live and grow in the presence of molecular oxygen.

AEROBIC: Environmental conditions that contain atmospheric levels of oxygen. Used in reference to microorganisms that grow optimally under these conditions. *See:* Facultative.

AGRANULOCYTOSIS (Granulocytopenia): A pathologic decrease in the number of circulating granulocytes—neutrophils, eosinophils, and basophils.

AIDS (ACQUIRED IMMUNE DEFICIENCY SYNDROME): A disease syndrome caused by the progressive loss of immune function that characterizes the progression of human immunodeficiency virus infection. This natural history is thought responsible for opportunistic, pernicious and eventually fatal conditions that include Kaposi's sarcoma, *Pneumocystis carinii* pneumonia, and others. Oral lesions may include necrotizing ulcerative gingivitis (NUG), necrotizing ulcerative periodontitis (NUP), linear gingival erythema (LGE), candidiasis, hairy leukoplakia, herpes simplex, and rapidly progressive periodontitis.

ALLELE: One of two or more different genes that may occupy the same locus on a specific chromosome.

ALLERGEN: A substance capable of producing allergy or specific hypersensitivity.

ALLERGY: The altered reactivity of a sensitized individual on exposure to an allergen.

ALLOGRAFT: *See:* Graft, Allograft.

ALVEOLAR BONE: *See:* Bone, Alveolar.

ALVEOLAR CREST: The most coronal portion of the alveolar process.

ALVEOLAR CREST FIBER: *See:* Fiber, Principal.

ALVEOLAR MUCOSA: *See:* Mucosa, Alveolar.

ALVEOLAR PROCESS: *See:* Process, Alveolar.

ALVEOLECTOMY: Removal of a portion of the alveolar process usually performed to achieve

acceptable ridge contour in preparation for construction of a denture or placement of an implant.

ALVEOLUS: The socket in the bone into which a tooth is attached by means of the periodontal ligament.

AMINOGLYCOSIDES: A group of antibiotics (streptomycin, gentamycin, tobramycin) commonly combined synergistically with penicillins.

AMPUTATION, ROOT: Removal of a root from a tooth retained *in situ*.

ANAEROBE: A microorganism that can survive in partial or complete absence of molecular oxygen.

ANAEROBIC: Used in reference to microorganisms that can survive and grow in the absence of molecular oxygen.

ANALGESIA: Absence of sensibility; the relief of pain without loss of consciousness.

ANAPHYLACTIC SHOCK: A severe, sometimes fatal, immediate allergic reaction, usually occurring seconds to minutes after exposure to an antigen and mediated via histamine.

ANAPHYLAXIS: Immediate hypersensitivity response to antigenic challenge, mediated by IgE and mast cells; typically life-threatening.

ANATOMIC CROWN: *See:* Crown, Anatomic.

ANATOMIC LANDMARK: A readily recognizable anatomical structure used as a point of reference.

ANESTHESIA: Loss of feeling or sensation caused by an anesthetic agent to permit diagnostic and treatment procedures.

BLOCK A.: Local anesthesia of a nerve trunk.

GENERAL A.: Depression of the central nervous system caused by anesthetic agents and characterized by simultaneous hypnosis, analgesia, and varying degrees of muscular relaxation, including—typically, the loss of protective laryngeal reflexes.

INFILTRATION A.: Local anesthesia of terminal nerves.

LOCAL A.: Loss of sensation in a localized area of the body, but without central effect.

REGIONAL A.: Local anesthesia of a regional body area.

TOPICAL A.: Anesthetic effect produced by the application of an anesthetic agent to a surface area.

ANGINA PECTORIS: Paroxysmal thoracic pain with feeling of suffocation and impending death; usually due to anoxia of the myocardium and precipitated by effort or excitement.

ANGULAR CHEILITIS: *See:* Cheilitis, Angular.

ANKYLOGLOSSIA (Tongue-Tie): Partial or complete fusion of the tongue with the floor of the mouth or the lingual gingiva due to an abnormally short, mid-line lingual frenulum, resulting in restricted tongue movement.

ANKYLOSIS: 1. Joint: fibrous or bony fixation.
2. Tooth: fusion of the tooth and the alveolar bone.

ANODONTIA: Congenital absence of the teeth. *See:* Oligodontia.

ANOMALY: A deviation from the usual form, location, or arrangement of a structure.

ANTAGONIST, DENTAL: A tooth in one jaw that articulates with a tooth in the opposing jaw.

ANTERIOR GUIDANCE: The influence on mandibular movement resulting from contact of opposing anterior teeth.

ANTIBIOTIC: Molecules or agents produced by microorganisms that have the capacity to kill or inhibit the growth of other microorganisms.

ANTIBODY: Serum proteins that are induced following interaction with an antigen. They bind specifically to the antigen that induced their formation thereby causing or facilitating the antigen's neutralization. *See:* Immunoglobulin.

ANTICOAGULANT: Any substance or agent that inhibits or prevents the coagulation of blood.

ANTIGEN: Any substance recognized by the immune system that induces antibody formation.

ANTIMICROBIAL THERAPY: The use of specific agents for the control or destruction of microorganisms, either systemically or at specific sites.

ANTISEPTIC: An agent that inhibits the growth and development of microorganisms.

ANTISPASMODIC: An agent capable of preventing or relieving convulsions or muscular spasms.

ANTRUM: A cavity or chamber, especially in a bone. *See:* Sinus.

MAXILLARY A (A. of Highmore): The air cavity in the body of the maxilla, lined with respiratory epithelium, that normally lies superior to the roots of the premolars and molars and generally extends from the canine or premolar region posterior to the molar or tuberosity region. It communicates with the middle meatus of the nose.

APERTURE: An opening or orifice.

APEX, TOOTH: The anatomic end of a tooth root.

APHTHA: An ulcer of the oral mucous membrane. Multiple ulcers are termed aphthae.

HERPETIFORM A.: Characterized by clusters of multiple, shallow ulcers throughout the oral cavity. Almost continuous in nature.

MAJOR A.: Large, scarring, recurrent aphthae, which may last for weeks or months. Previously termed periadeni.

MINOR A.: The most common form of recurrent aphthae. Also known as a canker sore. Shallow, painful, non-scarring ulcers surrounded by an erythematous halo that are usually found on movable, non-keratinized oral mucosa.

APICAL CURETTAGE: *See:* Curettage, Apical.

APICOECTOMY: The surgical removal of the apex of a tooth root.

APLASTIC: Without development; not forming.

APOPTOSIS: Cell death via fragmentation into membrane-enclosed particles that can be phagocytosed by other cells.

APPROXIMATION: The state of being near or close together, as in root approximation.

ARACHIDONIC ACID: A 20-carbon essential fatty acid that contains four double bonds (5, 8, 11, 14-eicosatetraenoic acid); the precursor of prostaglandins, prostacyclins, thromboxanes, and leukotrienes.

ARACHNIA PROPIONICA: *See: Propionibacterium Propionus.*

ARCH, DENTAL: The curved composite structure of the natural dentition and the alveolar ridge, or the residual bone after the loss of some or all of the natural teeth.

ARCHITECTURE: A term with an appropriate modifier, commonly used in periodontics to describe gingival and/or bony form.

PHYSIOLOGIC A.: A concept of soft tissue or bony form that includes positive architecture in a vertical dimension, buccal-lingual contours devoid of ledges and exostoses, and interradicular grooves.

POSITIVE A.: When the crest of the interdental gingiva or bone is located coronal to its midfacial midlingual margins.

REVERSE A.: When the crest of the interdental gingiva or bone is located apical to its midfacial and mid-lingual margins.

ARTHRALGIA: Pain in a joint.

ARTHROGRAPHY: Radiographic evaluation of a joint after injection of radiopaque contrast material.

ARTICULATION: 1. The contact relationships of mandibular teeth with maxillary teeth in excursive movements of the mandible. 2. A junction or union between two or more bones. 3. A skeletal joint.

ARTICULATOR: A mechanical device representing the temporomandibular joint and jaw members to which maxillary and mandibular casts may be attached.

ARTIFACT: Any artificial product or appearance. Used in histology and radiology to signify details or apparent conditions that are unnatural and misleading, owing to imperfect technique or materials.

ASACCHAROLYTIC: The inability of an organism to catabolize carbohydrates. Generally relates to sugar metabolism.

ASEPTIC: Free from infection or septic material; sterile.

ASTRINGENT: An agent that causes contraction of the tissues, arrests secretion, or controls bleeding.

ATRAUMATIC: Not inflicting or causing damage or injury.

ATROPHY: Diminution in size of a cell, organ, tissue, or part.

DISUSE A.: Results from inactivity.

PHYSIOLOGIC A.: Affects certain organs in all individuals as part of the normal aging process.

POST-MENOPAUSAL A.: A thinning of various tissues, such as the oral mucosa, following menopause.

SENILE A.: The atrophy of tissues due to advanced age.

ATTACHED GINGIVA: *See:* Gingiva, Attached.

ATTACHMENT APPARATUS: The cementum, periodontal ligament, and alveolar bone.

ATTACHMENT, EPITHELIAL: *See:* Epithelium, Junctional.

ATTACHMENT LEVEL, CLINICAL: The distance from the cemento-enamel junction to the tip of a periodontal probe during periodontal diagnostic probing. The health of the attachment apparatus can affect the measurement.

ATTACHMENT LEVEL, RELATIVE: The distance from a fixed reference point on a tooth or stent to the tip of the periodontal probe during usual periodontal diagnostic probing. The health of the attachment apparatus can affect the measurement. *See:* Attachment Level, Clinical.

ATTACHMENT, NEW: The union of connective tissue or epithelium with a root surface that has been deprived of its original attachment apparatus. This new attachment may be epithelial adhesion and/or connective adaptation or attachment and may include new cementum.

ATTRITION: The physiologic wearing away of a substance or structure, such as the teeth.

ATYPIA: Not conforming to type; irregular.

AUGMENTATION: The act of enlarging or increasing, as in size, extent, or quantity.

EDENTULOUS RIDGE A.: Procedures designed to correct a deformed alveolar ridge.

GINGIVAL A.: Procedures designed to increase the quantity of attached gingiva.

AUSCULTATION: The process of determining the condition of various parts of the body by listening to the sounds they emit.

AUTOGENOUS: Self-produced; not derived from an external source.

AUTOGENOUS BONE GRAFT: *See:* Graft, Autogenous Bone.

AUTOGRAFT: *See:* Graft, Autograft.

AUTOIMMUNITY: An immune response to an organism's own tissues or components.

AUTOLOGOUS MIXED LYMPHOCYTE

REACTION: A proliferative response of normal T-lymphocytes when co-cultured with autologous HLA-DR positive non-T-lymphocytes.

AUTORADIOGRAPHY: Photographic recording of radiation from radioactive material obtained by placing the surface of the radioactive material in proximity to a detector sensitive to the emitted spectrum, most commonly, X-ray film or a charge-coupled device.

AVASCULAR: Lacking in blood supply (e.g., tooth enamel).

AVITAMINOSIS: A condition due to a deficiency of vitamins.

AVULSION: The complete separation of a tooth from its alveolus. *See also:* Evulsion.

AXIS: 1. A real or imaginary straight line passing through the center of a body, such as the mandible. 2. "Long axis of a tooth," the central lengthwise line through the crown and the root. 3. A real or imaginary straight line around which a body may rotate.

B

B-CELL: *See:* Lymphocyte.

BACTEREMIA: The presence of bacteria in the bloodstream. The term is usually qualified as being transient, intermittent, or continuous in nature.

BACTERIAL SUCCESSION: A process of colonization by oral bacteria in a predictable, temporal pattern, with organisms altering the environment, allowing new organisms to become established or certain existing bacteria to achieve dominance.

BACTERICIDE: An agent capable of destroying bacteria. Also termed bacteriocide.

BACTERIA (plural), BACTERIUM (singular): Members of a group of ubiquitous, single-celled microorganisms that have a procaryotic (primitive) cell type. Many of these are etiologic in diseases that affect all life forms including humans and other animals.

BACTERIOGENIC: Caused by bacteria.

BACTERIOLYTIC: Characterized by or promoting the dissolution or destruction of bacteria.

BACTERIONEMA MATRUCHOTII: Gram-positive, non-motile, facultative, pleomorphic cells associated with subgingival calculus formation.

BACTERIOSTAT: An agent that inhibits or retards the growth and multiplication of bacteria.

BACTERIOSTATIC: Inhibiting or retarding the growth of bacteria.

BACTEROIDES FORSYTHUS: Gram-negative, non-motile, obligately anaerobic, non-spore forming, non-pigmented, rod-shaped bacteria found in subgingival plaque and associated with periodontitis.

BACTEROIDES GINGIVALIS: *See: Porphyromonas Gingivalis.*

BACTEROIDES INTERMEDIUS: *See: Prevotella Intermedia.*

BACTEROIDES MELANINOGENICUS: *See: Prevotella Melaninogenica.*

BACTEROIDES SSP.: *See: Porphyromonas and Prevotella.*

BALANCING INTERFERENCE: Tooth contact on the side of the translating condyle during a lateral excursion of the mandible. *See: Non-Functional Side.*

BALANCING SIDE: The side from which the mandible moves during lateral excursion. *See also: Non-functional Side.*

BARBITURATE: A class of sedative-hypnotic drugs derived from barbituric acid, differing primarily in lipid solubility and hypnotic efficacy.

BASAL BONE: *See: Bone, Basal.*

BASELINE DATA: 1. Measurements taken at the beginning of treatment with which subsequent measurements are compared. 2. In research, a known quantity or measurement with which subsequent data are compared.

BASOPHIL: A granular leukocyte containing vascular amines such as histamine and serotonin.

BED: The surgically-prepared recipient site for a graft. *See also: Graft, Soft Tissue.*

BEHCET'S SYNDROME: A condition of uncertain cause, usually seen in men, characterized by recurrent oral and genital ulcers and ocular inflammation.

BENIGN: Usually not threatening to health or life; not malignant.

BENIGN MUCOUS MEMBRANE

PEMPHIGOID: *See: Pemphigoid.*

BENNETT ANGLE: The angle made by the sagittal plane and the condyle on the balancing side during lateral mandibular movements.

BETA-GLUCURONIDASE: A lysosomal enzyme present in macrophages and polymorphonuclear leukocytes; important in the degradation of phagocytosed material.

BETA-LACTAM ANTIBIOTICS: Antibiotics containing a beta-lactam ring; the penicillins, cephalosporins, monobactams (aztreonam), and carbapenems (imipenem-cilastatin).

BETA-LACTAMASE: A bacterial enzyme that accounts for the major resistance mechanism to beta-lactam antibiotics by opening the beta-lactam ring of penicillins and cephalosporins.

BIFIDOBACTERIUM SSP.: Gram-positive, non-motile, anaerobic, rod-shaped bacteria found primarily in marginal and subgingival plaque.

BIFURCATION: The anatomic area where roots of a two-rooted tooth divide.

BIFURCATION INVASION: The extension of pulpitis or periodontitis into a bifurcation.

BIOACTIVE: Having an effect on or eliciting a response from living tissue.

BIOCOMPATIBLE: Being harmonious with life.

BIOFEEDBACK: A method of behavioral modification in which signals are relayed to the patient regarding the status of certain physiologic functions such as the heart rate and blood pressure.

BIOINTEGRATION: *See: Integration, Biointegration.*

BIOMECHANICS: The application of mechanical laws to living structures.

BIOPSY: The removal and examination, usually microscopic, of tissue for the purpose of establishing a histopathological diagnosis. May also refer to the tissue specimen obtained by this procedure.

ASPIRATION B.: The aspiration of fluid through a needle for the purpose of establishing a diagnosis.

EXCISIONAL B.: The removal of an entire lesion, including a significant margin of contiguous, normal-appearing tissue for microscopic examination and diagnosis.

INCISIONAL B.: The removal of a selected portion of a lesion and, if possible, adjacent normal-appearing tissue for microscopic examination and diagnosis.

BITE: The act of incising and crushing between the teeth.

BITE GUARD: *See:* Occlusal Guard.

BITEPLANE (Biteplate): A tooth-and-tissue-borne appliance usually constructed of plastic and wire and worn in the palate; used as a diagnostic or therapeutic adjunct.

BLACK-PIGMENTED: 1. Refers to organisms able to produce a diffusible black pigment upon colonial growth in vitro. The term is generally applied to species within the genus *Bacteroides*. 2. Dark-colored lesions.

BOLUS: A rounded mass of food or pharmaceutical preparation ready to be swallowed.

BONE: The hard form of connective tissue that constitutes the majority of the skeleton of most vertebrates. It consists of an organic component and an inorganic, or mineral, component. The organic matrix contains a framework of collagenous fibers and is impregnated with the mineral component, chiefly calcium phosphate and hydroxyapatite, that imparts rigidity to bone. The alveolar process supports to alveoli, and consists of cortical bone, cancellous trabeculae, and the alveolar bone proper.

ALVEOLAR B. PROPER: Compact bone that composes the alveolus (tooth socket). Also known as the lamina dura or cribiform plate, the fibers of the periodontal ligament insert into it.

BASAL B.: The bone of the mandible and maxilla exclusive of the alveolar process.

BUNDLE B.: A type of alveolar bone, so-called because of the "bundle" pattern caused by the continuation of the principal (Sharpey's) fibers into it.

CANCELLOUS B.: Bone having a reticular, spongy, or lattice-like structure.

COMPACT B.: Bone substance that is dense and hard.

CORTICAL B.: The compact bone at the surface of any given bone.

BONE FILL: The clinical restoration of bone tissue in a treated periodontal defect. Does not address the presence or absence of histologic evidence of new connective tissue attachment or the formation of a new periodontal ligament.

BONE GRAFT, AUTOGENOUS: *See:* Graft, Autogenous Bone.

BONE MARROW: *See:* Marrow.

BONY DEFECTS: *See:* Periodontal Bony Defects.

BORDER MOVEMENTS: The positions of the mandible at its most extreme limits. These movements are unique for each individual and are reproducible. All other mandibular movements take place within the limits of the border movements.

BRUXISM (Tooth Grinding, Occlusal Neurosis): A habit of grinding, clenching, or clamping the teeth. The force so generated may damage both tooth and attachment apparatus.

BUCCOVERSION: The deviation of a tooth from the normal alignment of the dental arch toward the buccal mucosa.

BULLA: A vesicle larger than 5 mm in diameter.

BUNDLE BONE: *See:* Bone, Bundle.

BUTTRESSING BONE: Marginal linear aspect of bone, which may be formed in response to heavy occlusal forces.

C

CALCIFY: *See:* Mineralize.

CALCULUS, DENTAL (Tartar): A hard concretion that forms on teeth or dental prostheses through calcification of bacterial plaque.

SUBGINGIVAL (Seruminal) C.: Calculus formed apical to the gingival margin; often brown or black, hard, and tenacious.

SUPRAGINGIVAL (Salivary) C.: Calculus formed coronal to the gingival margin; usually formed more recently than subgingival calculus.

CAMPYLOBACTER RECTUS: Formerly called *Wolinella recta*. Gram-negative, motile, facultative bacteria that are surface translocating and can be found as helical, curved, or straight bacterial cells. Found in periodontitis patients, they exhibit a rapid, darting type of bacterial motility by means of flagella located at one pole of the bacterial cell.

CANAL, ROOT: The portion of the dental pulp cavity in the root of a tooth.

ACCESSORY (LATERAL) ROOT C.: A lateral branch of the main root canal most often found in the apical half of the roots and in furcation areas.

CANCELLOUS BONE: *See:* Bone, Cancellous.

CANDIDA SSP.: A yeast-like fungus often found in association with oral diseases such as “thrush” (oral candidiasis). Usually stains Gram-positive, is aerobic, and is significantly larger than bacteria. Most frequently encountered species is *C. albicans*.

CANDIDA ALBICANS: The most pathogenic species of *Candida*. Usually a harmless inhabitant of mucous membranes, but under certain conditions may cause infections.

CANDIDIASIS (Thrush): An infection with a fungus of the genus *Candida*, usually *C. albicans*, that is associated with several predisposing factors including the use of broad spectrum antibiotics, pregnancy, xerostomia, diabetes mellitus, and suppression of the immune system. Clinical features include soft, white, curd-like plaques that can be wiped away leaving an erythematous area.

CANINE PROTECTION: A form of articulation in which the overlap of the canine teeth disengages the posterior teeth in excursive movements. *See:* Guidance, Canine.

CANKER SORES: *See:* Aphtha, Minor.

CAPNOCYTOPHAGA SSP: Gram-negative, capnophilic (carbon-dioxide loving), fusiform bacilli found as normal oral flora in humans. May be associated with systemic disease, usually in leukemic and/or granulocytopenic patients.

CAPNOPHILIC: Refers to a type of organism that grows optimally under conditions of increased (above atmospheric levels) partial pressure of carbon dioxide. (e.g., *Capnocytophaga ssp.*)

CAPSULE, BACTERIAL: An extracellular coating usually composed of mucopolysaccharides produced by some bacteria. May increase an organism's virulence by interfering with the nonspecific immune system (phagocytosis) of the host.

CARCINOMA: A malignant growth of epithelial cells tending to infiltrate the surrounding tissues giving rise to metastases.

CARDIOPULMONARY RESUSCITATION (CPR): Emergency manipulatory measures

employed to maintain circulation of the blood and restore respiration.

CARIES: A localized and progressive disintegration of a tooth usually beginning with the dissolution of the enamel and followed by bacterial invasion of the dentinal tubuli.

CAST, STUDY OR DIAGNOSTIC: A positive replica of the teeth and adjacent tissues usually formed by pouring plaster into a matrix or impression.

CATALASE: An enzyme capable of degrading hydrogen peroxide to water and oxygen. Several bacterial species, as well as host cells, produce catalase, which can be used as an aid to bacterial identification.

CAUTERY: The application of a caustic substance, a hot instrument, an electric current, or other agent to destroy tissue.

CAVERNOUS RESORPTION: *See:* Resorption, Cavernous.

CAVITY, PULP: The internal space within a tooth, which normally houses the dental pulp.

CD ANTIGENS: Cell surface molecules that are distinguishable with specific monoclonal antibodies and may be used to differentiate cell populations. For example, clusters of differentiation (CD) antigens include CD4, CD8, CD40.

cDNA: A fragment of DNA complementary to a specific RNA sequence, synthesized from it in vitro by reverse transcription. cDNA probes can be used for the identification of pathogenic bacteria in dental plaque samples.

CELL-MEDIATED IMMUNITY: An immune reaction mediated by T lymphocytes (activated lymphocytes release biologic response modifiers—lymphokines—on exposure to antigen).

CELLULITIS: A diffuse inflammation; the term usually applies to purulent inflammation within loose subcutaneous tissue.

CEMENTICLE: A calcified, spherical body composed of cementum, lying free within the periodontal ligament, attached to the cementum or imbedded within it.

CEMENTO-DENTINAL JUNCTION: *See:* Junction, Cemento-Dentinal.

CEMENTO-ENAMEL JUNCTION: *See:* Junction, Cemento-Enamel.

CEMENTOGENESIS: The development or formation of cementum.

CEMENTOID: The uncalcified surface layer of cementum. Collagen fibers are incorporated into this tissue, some of which extend to the alveolar bone contributing to the periodontal ligament.

CEMENTOMA: *See:* Dysplasia, Periapical Cemental.

CEMENTUM: The thin, calcified tissue of ecto-mesenchymal origin covering the roots of teeth in which embedded collagen fibers attach the teeth to the alveolus.

ACELLULAR C.: That portion of the cementum that does not incorporate cells.

CELLULAR C.: That portion of the cementum that contains cementocytes. It is found primarily in the apical third of the root.

CENTRIC OCCLUSION: *See:* Occlusion, Centric.

CENTRIC PREMATUREITY: An occlusal contact or interference that occurs before a balanced and stable jaw-to-jaw relationship is reached in centric occlusion or centric relation.

CENTRIC RANGE: The distance between centric relation and centric occlusion in a horizontal plane. Also termed long centric.

CENTRIC RELATION: 1. The most retruded physiologic relation of the mandible to the maxilla from which lateral movements can be made. Can exist at various degrees of jaw separation and occurs around the terminal hinge axis. 2. The most posterior relation of the mandible to the maxilla at the established vertical relation.

CENTRIC SLIDE: The movement of the mandible from centric relation to centric occlusion.

CEPHALOSPORINS: Broad spectrum beta-lactam antibiotics chemically related to and having the same mechanism of action as the penicillins.

CERVIX: A neck or constricted portion; specifically, the narrowed region at the junction of the crown with the root of a tooth.

CHAMBER, PULP: That portion of the pulp cavity within the anatomic crown of the tooth.

CHEILITIS, ANGULAR: Inflammation affecting the corners or commissures of the mouth.

CHEILOSIOS: Fissuring and dry scaling of the vermillion surface of the lips and corners of the mouth.

CHEMOATTRACTANT: A chemical or biological mediator that causes certain cells to move toward the site containing the highest concentration of the chemical.

CHEMOKINESIS: Increased activity of an organism due to the presence of a chemical substance.

CHEMOTAXIS: The migration of cells along a concentration gradient of an attractant.

CHEMOTHERAPY: The prevention or treatment of a disease by chemical agents.

CHLAMYDIA SSP: Obligate intracellular parasites, which are related to Gram-negative bacteria, and multiply by binary fission in the cytoplasm of the host cell.

CHLORHEXIDINE: A bis-biguanide antiseptic agent used to prevent colonization and kill or inhibit microorganisms on surfaces of skin, mucous membranes, and teeth.

CHROMOSOME: One of the nuclear bodies that carries hereditary factors in cells. There are 46 in humans.

CHRONIC: Continuing over a long period of time. Used to describe a disease state of long duration.

CICATRIX: The fibrous connective tissue that follows the healing of a wound; a scar.

CINGULUM: A lobe on the palatal/lingual aspect of an anterior tooth.

CITRIC ACID: A tricarboxylic acid that may be useful in near-saturated solution (pH = 1 to 1.4) to detoxify (cleanse) diseased root surfaces and expose intrinsic collagen fibers in new attachment therapy.

CLEARANCE: A measure of the body's ability to eliminate a drug.

CLEFT, GINGIVAL: A vertical fissure in the gingiva.

CLEIDOCRANIAL DYSPLASIA: A condition, often inherited, characterized by open fontanels and sutures in the skull; complete or partial absence of the

clavicles; underdeveloped maxilla with a high, narrow, arched palate; prolonged retention of deciduous teeth; and numerous unerupted supernumerary teeth.

CLICKING: With respect to temporomandibular articulation, a snapping or cracking noise evident on movement of one or both mandibular condyles.

CLINDAMYCIN: A lincosamide antibiotic with a broad spectrum of bacteriostatic activity particularly against anaerobes; pseudomembranous colitis has been reported as a common side effect (0.01 to 10%) of patients taking this medication.

CLINICAL: Pertaining to the signs, symptoms, and course of a condition or disease as observed by a clinician.

CLINICAL ATTACHMENT LEVEL: *See:* ATTACHMENT LEVEL, CLINICAL.

C. CROWN: *See:* CROWN, CLINICAL.

C. DIAGNOSIS: *See:* DIAGNOSIS, CLINICAL.

C. RECORD: Information comprising a patient's medical and dental history, clinical findings, diagnosis, prognosis, plan of therapy, and progress of treatment.

CLONE: Refers to the progeny of a somatic cell all having identical genotype.

CMV (Cytomegalovirus): A DNA virus, genetically distinct from other herpes viruses, that grows more readily in fibroblasts than in epithelial and lymphoid cells; causes cytomegalic inclusion disease, mononucleosis, and is secreted in renal transplant patients.

COAGULATION (Clotting): The process of changing liquid to solid, especially of blood.

COAGULUM, OSSEOUS: *See:* Osseous Coagulum.

COAPTATION: Proper adjustment of displaced parts, as in the ends of fractured bone, the edges of a wound, etc.

COCCOBACILLUS: A descriptive term of bacterial cell morphology referring to a structure intermediate in shape between a true coccus and a bacillus (rod).

COL: A valley-like depression of the interdental gingiva that connects facial and lingual papillae and conforms to the shape of the interproximal contact area.

COLD SORE: *See:* Herpes.

COLLAGEN: A genetically distinct family of structural macromolecules of the extracellular matrix that contains one or more domains assembled in a triple helix. These proteins form a wide variety of structures.

COLLAGENASE: A neutral metalloproteinase that catalyzes the degradation of collagen.

COLONIZATION: Formation and establishment of population groups of the same type of microorganism, such as in the periodontal pocket.

COMMISSURE: The union of the lips at the angles of the mouth.

COMPACT BONE: *See:* Bone, Compact.

COMPLAINT: A symptom, malady, ailment, disorder, or disease reported by a patient.

COMPLEMENT: A group of serum proteins involved in the control of inflammation, the activation of phagocytes, and the lytic attack on cell membranes. The system can be activated by interaction with antigen-antibody complexes or by bacterial substances.

COMPLIANCE: Action in accordance with recommendation(s).

COMPUTERIZED TOMOGRAPHY (CT): The technique by which multidirectional x-ray transmission data through a body are mathematically reconstructed by a computer to form an electrical cross-section (slice) of a patient's anatomy.

CONCRESCENCE: The union of roots of approximating teeth via a deposition of cementum.

CONCRETION: An inorganic mass in a natural cavity or in the tissue of an organism.

CONDENSING OSTEITIS: *See:* Osteitis, Condensing.

CONDITIONED REFLEX: A learned response to a stimulus.

CONDYLAR GUIDANCE: The path that the condyles travel during translatory movements. The inclination of the path can be measured in degrees as related to the Frankfort plane.

CONGENITAL: Present at birth.

CONSANGUINITY: Relationship occurring due to common ancestors; blood relationship.

CONSCIOUS SEDATION: *See:* Sedation, Conscious

CONSULTATION: The joint deliberation, usually for explanatory or diagnostic purposes, between a patient and practitioner, or two or more practitioners.

CONTACT SURFACE: The area on the proximal surface of a tooth that touches an adjacent tooth.

CONTAGIOUS: Communicable by contact; spreading from one to another.

CONTRACTION (Muscle): The development of tension in a muscle in response to a nervous stimulus.

ISOMETRIC C.: An increase in muscular tension at the same muscle length, as in clenching teeth.

ISOTONIC C.: Steady muscle tension generated by a shortening muscle against a load. Work rate (power output) remains constant during an isotonic contraction.

POSTURAL C.: Maintenance of muscular tension (usually isometric) sufficient to maintain posture.

CONTRACTURE: A permanent shortening of a muscle resulting from fibrosis.

CONTRALATERAL: Situated on, pertaining to, or affecting the opposite side, as opposed to ipsilateral.

CONTRAST, RADIOGRAPHIC IMAGE: The visible differences in photographic or film density produced on a radiograph by the structural composition of the object or objects radiographed. Radiographs made with higher kilovoltage (e.g., 90 kv) have a longer scale contrast and appear dull by comparison with those made at lower voltages, but they have improved image character for interpretation.

CORTICAL BONE: *See:* Bone, Cortical.

COUMARIN: An anticoagulant that inhibits the hepatic synthesis of the vitamin K-dependent coagulation factors.

COXSACKIEVIRUS: An enterovirus occasionally found in association with ulcerative oral lesions.

CRATER: A saucer-shaped defect of soft tissue or bone, often seen interdentally. *See:* Periodontal Bony Defects.

CREPITUS (Crepitation): A crackling or grating noise in a joint during movement.

CREST: A projection or ridge. In periodontics, usually refers to the most coronal portion of the alveolar process.

CREVICULAR EPITHELIUM: The nonkeratinized epithelium of the gingival crevice.

CREVICULAR FLUID: *See:* Gingival Fluid.

CRIBRIFORM: Perforated like a sieve.

CRIBRIFORM PLATE, DENTAL: The alveolar bone proper.

CROHN'S DISEASE: A chronic, granulomatous disease of unknown cause involving any part of the gastrointestinal tract, but commonly involving the terminal ileum. Oral lesions may be granulomatous in nature, having a cobblestone mucosal surface, milium ulceration, and linear fissures with a patchy distribution. Aphthae and glossitis may be seen.

CROSS-BITE: An abnormal relation of a tooth or teeth of one arch to its/their antagonists in the other arch due to lateral deviation of tooth position or abnormal jaw position. In a crossbite relationship, mandibular crown or crowns are more facially positioned than their maxillary counterparts.

ANTERIOR C.: One or more maxillary incisors positioned on the lingual side of the mandibular incisors when the jaws are closed.

POSTERIOR C.: One or more maxillary posterior teeth positioned in a palatal relationship with the mandibular teeth when the jaws are closed.

CROWDING: Discrepancy between tooth sizes and arch length and/or tooth positioning that results in malalignment and abnormal contact relationships between teeth.

CROWN: The part of a tooth that is covered with enamel or a dental restoration and normally projects beyond the gingival margin.

ANATOMIC C.: The portion of a natural tooth that extends from its cemento-enamel junction to the occlusal surface or incisal edge.

CLINICAL C.: The portion of a tooth that extends occlusally or incisally from the margin of the investing soft tissue, usually gingiva.

CROWN, LENGTHENING OF CLINICAL: A surgical procedure designed to increase the extent of supragingival tooth structure for restorative or esthetic purposes by apically positioning the gingival margin, removing supporting bone, or both. May be accomplished by orthodontic tooth movement.

CROWN-ROOT RATIO: The relationship between the extra-alveolar arm of the tooth and the intra-

alveolar arm of the tooth as determined radiographically.

CRYOSURGERY: Destruction of tissue by extreme cold. Usually achieved with liquid nitrogen or carbon dioxide.

CRYPT: A follicle or small glandular sac.

CULTURE: The propagation of microorganisms or living tissue cells in special media conducive to their growth.

CURATIVE: Tending to overcome disease and promote recovery.

CURET, PERIODONTAL: An instrument used for debridement (curettement) of tooth roots, periodontal pockets, and bone.

CURETTAGE: Scraping or cleaning the walls of a cavity or surface by means of a curet. *See:* Root Planing.

APICAL (Periapical) C.: Surgical removal of tissue or foreign material surrounding the apex of a tooth.

CLOSED C.: Performed via the gingival crevice without flap reflection.

GINGIVAL C.: The process of debriding the soft tissue wall of a periodontal pocket.

OPEN C.: Facilitated by reflection of a soft tissue flap.

ROOT C.: Scraping or cleaning the walls of a surface by means of a curet. *See:* Root Planing.

CURETTE: *See:* Curet, Periodontal.

CURTAIN PROCEDURE: A procedure designed to retain the marginal portion of the facial and interproximal gingiva for esthetic purposes in the surgical treatment of periodontal pockets, usually in the maxillary anterior region, by means of a palatal approach. The facial gingiva will be coronal to the palatal margin, thus creating a "curtain."

CURVE OF SPEE: The anatomic curvature of the occlusal alignment of teeth beginning at the tip of the lower canine, following the buccal cusps of the natural premolars and molars, and continuing to the anterior borders of the ramus.

CUSPID GUIDANCE: *See:* Canine Protection.

CYCLOSPORINE: An immunosuppressant and antifungal agent used to prevent rejection in organ transplant recipients. It can be associated with gingival overgrowth.

CYST: A pathologic cavity lined by epithelium and usually containing fluid or semisolid material.

APICAL PERIODONTAL C.: The most common odontogenic cyst; involving the apex of a root and resulting from the inflammatory reaction to a nonvital pulp.

DENTIGEROUS C.: Forms around the crown of an unerupted tooth or odontoma.

DEVELOPMENTAL C.: Results from a formative aberration.

GINGIVAL C.: Found within the gingiva, most commonly in the mandibular canine-premolar region. Believed to be derived from epithelial rests of the dental lamina.

INCISIVE CANAL C. (Nasopalatine Duct C. And Median Anterior Maxillary C.): A developmental, non-odontogenic cyst originating from embryonic remnants within the incisive canal.

KERATINIZING ODONTOGENIC C. (Calcifying and Keratinizing Odontogenic C., Gorlin's C.): An odontogenic cyst found most often in the mandibular canine and premolar region; has distinct microscopic features including basal epithelial cells that resemble ameloblasts, large prematurely keratinized eosinophilic cells (ghost cells), and the production of an amorphous material referred to as "dentinoid;" may be totally cystic or predominantly solid.

KERATOCYST: Developmental odontogenic cyst of the dental lamina in which the epithelial cells produce keratin; known for its aggressive nature and high recurrence rate.

LATERAL PERIODONTAL C.: A small cyst of the periodontal ligament found most often in the mandibular canine and premolar areas; associated with a vital tooth and postulated to originate from the rests of Malassez, the rests of the dental lamina, or a supernumerary tooth bud.

ODONTOGENIC C.: A class of cysts derived from odontogenic epithelium, such as Primordial, dentigerous, and lateral periodontal cysts.

PERIODONTAL C.: *See:* Cyst, Lateral Periodontal C.

PRIMORDIAL C.: An odontogenic cyst resulting from degeneration of the enamel organ of a developing tooth bud.

RADICULAR C.: A cyst along the root of a tooth. Previously the term often was used synonymously with what is now more accurately referred to as an apical periodontal cyst.

RESIDUAL C.: A cyst in the maxilla or mandible that remains after the associated tooth has been removed.

RETENTION C.: Caused by retention of glandular secretion.

MUCOCELE: A cyst or cyst-like structure that contains mucous glycoproteins.

RANULA: Forms in the floor of the mouth as a result of trauma or blockage of a salivary gland duct. It may be lined with epithelium.

TRAUMATIC (Hemorrhagic Bone) C.: A radiolucent lesion in the bone without a radiopaque border; a cavity of disputed cause, lined by extremely thin or no tissue, which may contain fluid (blood or serum). It is assumed to have been caused by trauma. Teeth, if present, are vital. Not a true cyst.

CYTOKINES: A large group of proteins made by cells that are capable of regulating a wide variety of cellular functions.

CYTOMEGALOVIRUS: *See* CMV.

CYTOTOXIC: Having the ability to kill cells.

CYTOTOXIN: An agent that inhibits or prevents the function of cells.



DARK-FIELD MICROSCOPY: A technique utilizing a microscope modified by a special condenser that allows light to enter only peripherally so that objects such as microorganisms are obliquely illuminated and glow against a dark background.

DEBRIDEMENT: The removal of inflamed, devitalized, or contaminated tissue or foreign material from or adjacent to a lesion.

DEBRIS: An accumulation of foreign material on the teeth and adjacent structures.

DECALCIFICATION: The removal of calcium salts from a bone or tooth.

DECAY: The gradual decomposition of dead organic matter. *See:* Caries.

DECORTICATION: Removal of cortical bone. Often used to describe multiple penetrations of the cortical surface of an intrabony defect.

DEFECT: *See:* Periodontal Bony Defects.

DEFLECTIVE OCCLUSAL CONTACT: A condition of tooth contact that diverts the mandible from a normal path of closure. *See:* Occlusal Disharmony.

DEMINERALIZATION: Decalcification; loss of mineral salts.

DENATURANT: A chemical that denatures or disrupts the three-dimensional structure of proteins causing them to lose their tertiary structure.

DENS IN DENTE: A developmental abnormality in tooth formation resulting from invagination of the epithelium associated with coronal development into the area that was destined to become the pulp space. Gives the radiographic appearance of a "tooth within a tooth."

DENTAL DYSFUNCTION: Abnormal functioning of dental structures.

DENTAL DYSPLASIA: *See:* Dysplasia, Dental.

DENTAL HISTORY: A complete record of all relevant aspects of an individual's oral and general health.

DENTAL HYGIENIST: A licensed dental auxiliary who is both an oral health educator and clinician and who uses preventive, educational, and nonsurgical therapeutic methods to control oral disease.

DENTAL PROPHYLAXIS: *See:* Prophylaxis, Oral.

DENTICLE (Pulp Stone): A calcified mass of dentin, which may be free within the pulp, attached to the pulpal wall, or embedded in the dentin.

DENTIFRICE: A preparation intended to clean and polish the teeth. Active ingredients to prevent caries and plaque accumulation or to desensitize teeth may be included.

DENTIN: The chief substance or tissue forming the body of the teeth. It surrounds the pulp and is covered by coronal enamel and radicular cementum.

REPARATIVE D.: Deposition of dentin in response to pulpal insult. Also called irregular dentin.

SECONDARY D.: Dentin deposited after root end formation is complete.

DENTINAL HYPERSENSITIVITY: The short, exaggerated, painful response elicited when exposed dentin is subjected to certain thermal, mechanical, or chemical stimuli. *See:* Pulpitis.

DENTITION: The natural teeth as considered collectively in the dental arches; may be primary, permanent, or mixed.

DENTULOUS: A condition in which natural teeth are present in the mouth.

DENTURE: An artificial substitute for natural teeth. A complete denture replaces all of the teeth in an arch. *See:* Prosthesis.

FIXED PARTIAL D.: A replacement of one or more missing teeth that cannot be readily removed by the patient or dentist; it is fixed or bonded to natural teeth, roots, or implants which furnish the primary support to the prosthesis.

OVERDENTURE: Complete or partial removable denture supported by soft tissue and retained roots or implants to provide stability and reduce ridge resorption.

REMOVABLE PARTIAL D.: A dental prosthesis that artificially supplies teeth or other associated structures in a partially edentulous jaw and can be removed and replaced at will.

DENUATION: The act or process of removing the covering from any surface. In periodontics, often refers to removal of all soft tissue overlying the bone.

DEOXYRIBONUCLEIC ACID (DNA): A nucleic acid that constitutes the genetic material of all cellular organisms and the DNA viruses.

DESENSITIZE: To diminish or abolish sensation of pain or sensitivity, as in dentin.

DESQUAMATION: Exfoliation; the process of shedding surface epithelium.

DETOXICANT: A chemical that degrades a toxic agent.

DIABETES MELLITUS: A chronic syndrome of impaired carbohydrate, protein, and fat metabolism secondary to insufficient secretion of insulin or to target tissue insulin resistance. Considered to be a modifying or accelerating factor in periodontal diseases. Data also suggest that periodontal diseases also influence the course of diabetes (e.g., increase glycated hemoglobin).

DIAGNOSE: To recognize or determine the nature of a disease or abnormal state or condition by study and consideration of the signs and symptoms and their manifestation.

DIAGNOSIS: 1. The art and science of detecting and distinguishing deviations from health and the cause and nature thereof. 2. The determination of the nature, location, and causes of a disease or disorder.

CLINICAL D.: Determination of a condition based on history and physical examination without use of laboratory or microscopic tests.

LABORATORY D.: Diagnosis based on the examination of fluids or tissues in the laboratory.

PERIODONTAL D.: Recognizing a departure from health in the periodontium and distinguishing one disease, disease categorization, or etiology from another. Based on information obtained from the medical and dental histories, clinical and radiographic examination of the patient, and laboratory findings.

DIAGNOSTIC CAST: *See:* Cast.

DIAPYCNOSIS: The outward passage of cells through intact blood vessels.

DIASTEMA: A space between two adjacent teeth in a dental arch.

DIAZEPAM: A benzodiazepine anxiolytic having antianxiety, sedative-hypnotic, amnesic, anti-convulsant, skeletal muscle relaxant, and drug dependence properties.

DIETARY ANALYSIS: The evaluation of a diet on the basis of its content, quality, and nutrients in order to determine any imbalance or deficiency that might contribute to a disease process.

DIETARY GUIDANCE: Counseling on food selection and dietary habits.

DILACERATION: 1. A tearing apart. 2. A distortion of the root or crown of a tooth resulting from an injury during tooth development. Through common usage, the term now includes teeth with sharply angulated and deformed roots.

DISC, ARTICULAR: A fibrous connective tissue structure separating the joint cavities of the temporomandibular joint; also termed the meniscus.

DISCLOSANT: A dye (tablet or solution) used to stain dental plaque. Used primarily as an aid in oral hygiene instruction.

DISEASE: A pathologic condition that presents a group of clinical signs, symptoms, and laboratory

findings peculiar to it and setting the condition apart as an abnormal entity differing from normal or other pathologic conditions.

LOCAL CONTRIBUTING FACTOR: A local feature that may influence the presentation of the disease, such as an overhanging restoration.

DISINFECTANT: An agent that destroys or inhibits the activity of disease-producing or other harmful microorganisms, but usually does not destroy bacterial spores; commonly refers to chemical agents applied to inanimate objects.

DISOCCLUDE: To cause loss of contact between opposing teeth as a result of tooth guidance, occlusal interferences, or occlusal adjustment.

DISTAL WEDGE: A periodontal surgical procedure for removal of excessive soft tissue distal to a terminal tooth in an arch. *See:* Proximal Wedge.

DISTOCCLUSION: The abnormal posterior or distal relationship of the mandibular to the maxillary teeth as in an Angle Class II occlusion.

DISUSE ATROPHY: *See:* Atrophy, Disuse.

DIVERGENCE: Separation or spreading apart from a common center, base, or root.

DNA: *See:* Deoxyribonucleic Acid.

DOCUMENTATION, PERIODONTAL:

Diagnostic, therapeutic, and consultative records of a patient.

DONOR SITE: An area of the body from which a graft is taken. Examples are skin, masticatory mucosa, and bone.

DRESSING, SURGICAL: *See:* Periodontal Dressing.

DRUG: Any chemical that alters the physiologic processes of living systems.

DRUG AGONIST: Chemicals that react with a receptor and initiate a cellular reaction.

DRUG ANTAGONIST: Chemicals that prevent reaction of a drug agonist with its receptor and inhibit.

DRUG EFFICACY: The ability of a chemical to produce a biological effect.

DRUG POTENCY: The power of a chemical to produce an effect that is contingent upon the concentration of the chemical.

DRY SOCKET: *See:* Socket, Dry.

DYSFUNCTION: Disturbance, impairment, or abnormality of the function of cells or an organ.

DYSKINESIA: Difficulty in performing voluntary movements.

DYSOSTOSIS: Imperfect ossification.

DYSPHAGIA: Difficulty in swallowing.

DYSPLASIA: Abnormality of development; in pathology, alteration in size, shape, and organization of cells.

DENTINAL D.: A hereditary disorder affecting the teeth and characterized by abnormal dentin, defective root formation, and a tendency for periapical pathosis.

ECTODERMAL D.: An inherited condition characterized by fine, scanty, blond hair; depressed bridge of the nose; and a partial or complete absence of sweat glands and teeth.

PERIAPICAL CEMENTAL D. (Cementoma): A process of unknown origin in which the periapical bone of vital teeth is replaced first by a fibrous type of connective tissue, and then by an osseocementoid tissue. During its early stages this abnormality appears radiolucent and with time the center becomes opaque. It is classified as an odontogenic tumor.

DYSTROPHY, PERIODONTAL: Changes resulting from mechanical, circulatory, degenerative, atrophic, or hypertrophic influences that interfere with the normal physiologic processes of the periodontium.

E

ECCENTRIC RELATION, ECCENTRIC POSITION: *See:* Occlusion, Eccentric.

ECCHYMOSIS: An extravasation of blood into subcutaneous tissue or mucosa.

ECOLOGY: The study of the relationships of organisms with other organisms and their environment.

ECTODERMAL DYSPLASIA: *See:* Dysplasia, Ectodermal.

ECTOPIC: Occurring in an unusual position, manner, or form, as in ectopic eruption.

EDEMA: An abnormal swelling resulting from an accumulation of fluid in a tissue or part.

EDENTULOUS: Without teeth.

EIKENELLA CORRODENS: Gram-negative, non-motile, microaerophilic, rod-shaped bacteria found primarily in subgingival plaque. Also associated with sinusitis, meningitis, pneumonia, and endocarditis.

ELECTROSURGERY: Division of tissues by high frequency electrical current applied locally with a metal instrument or needle.

ELISA: Acronym for enzyme-linked immunoadsorbent assay wherein an enzyme-antibody complex binds to an agent thought to be present in a sample. Typically, an enzyme-activated dye is used to detect the presence of bound immunoglobulin-enzyme complex. The amount of color is proportional to the concentration of bound antibody/suspect agent present in the test sample.

EMBOLUS: A blood clot, air, or other foreign material that travels in the bloodstream until it obstructs a blood vessel.

EMBRASURE: The space between the proximal surfaces of adjacent teeth where those surfaces diverge apically, buccally, lingually, or occlusally from an area of contact.

EMIGRATION: *See:* Diapedesis.

EMPHYSEMA: 1. A pathological accumulation of air or gas in tissue spaces. In the oral and facial regions it may be caused by an air syringe, an air-driven dental handpiece, coughing, or blowing the nose.
2. Permanent dilation of respiratory alveoli.

ENAMEL: The hard, calcified tissue covering the coronal dentin.

ENAMEL PEARL: A small, focal mass of enamel formed apical to the cemento-enamel junction.

ENAMEL PROJECTION: An apical extension of enamel, usually toward a furcation.

ENDEMIC: Present in a community at all times. Occurs continuously.

ENDOCARDITIS: Inflammation of the endocardial surface of the heart.

INFECTIVE E.: A microbial infection of the endocardial surface of the heart, usually involving the heart valves. Formerly classified as acute, subacute, and chronic bacterial endocarditis, but now delineated by the offending microorganism (i.e., streptococcal infective endocarditis).

ENDOCRINOPATHY: A disorder resulting from an abnormality of the endocrine glands or their secretions.

ENDOGENOUS: 1. Growing from within. 2. Developing or originating within an organism or arising from causes within an organism.

ENDOTHELIUM: The layer of squamous cells lining blood vessels, lymphatics, the heart, and all serous and synovial cavities of the body.

ENDOTOXIN: A heat-stable, lipid polysaccharide complex found in the cell wall of many Gram-negative microorganisms. It can be cytotoxic, pyogenic, and has been shown to induce and/or amplify inflammation and has been implicated in the etiologies of periodontitis.

ENOSTOSIS: A bony growth located within a bony cavity or extending centrally from the cortical plate. *See:* Osteitis, Condensing.

ENUCLEATE: To remove an organ or lesion in its entirety.

ENZYME: A catalytic substance, protein in nature, formed by living cells and having a specific action in promoting a chemical change.

ENZYME-LINKED IMMUNOADSORBENT ASSAY: *See* ELISA.

EPINEPHRINE: A neuro-hormone produced and secreted into the circulation by the adrenal medulla; a catecholamine which has adrenomimetic effects; used in local anesthetic solutions for its vasoconstrictive properties.

EPITHELIAL ATTACHMENT: *See:* Epithelium, Junctional.

EPITHELIALIZATION (Epithelization): Healing by growth of epithelium over connective tissue.

EPITHELIUM, ORAL: The tissue serving as the lining of the intraoral surfaces. It extends into the gingival crevice and adheres to the tooth at the base of the crevice.

CREVICULAR E.: The non-keratinized epithelium of the gingival crevice.

JUNCTIONAL E.: A single or multiple layer of non-keratinizing cells adhering to the tooth surface at the base of the gingival crevice. Formerly called epithelial attachment.

SULCULAR E.: *See:* Epithelium, Crevicular.

EPSTEIN-BARR VIRUS (EBV): Herpes; DNA virus that causes Burkitt's lymphoma in which the human peripheral blood leukocytes are transformed into lymphoblast-like cells with an indefinite life span.

EPULIS: A non-specific term for any tumor of the gingiva.

EQUILIBRATION, OCCLUSAL: *See:* Occlusal Adjustment.

EROSION: An apparent chemical dissolution of enamel and dentin, unrelated to caries, causing a cavity that has a hard, smooth base.

ERUPTION, DENTAL: The emergence of a tooth into the oral cavity.

ACTIVE E.: The process by which a tooth moves from its germinative position to its functional position.

PASSIVE E.: Tooth exposure secondary to apical migration of the gingiva.

ERYTHEMA: Redness of the skin or mucous membranes produced by congestion of the capillaries.

LINEAR GINGIVAL ERYTHEMA: A gingival manifestation of immunosuppression characterized by a distinct linear erythematous band limited to the free gingiva. The lesion does not predictably respond to plaque removal.

ERYTHEMA MULTIFORME: An acute dermatitis of unknown cause that may be precipitated by drug intake, herpes simplex infection, or other diseases. Characteristic erythematous "target" or "bull's eye" lesions occur on the skin; intraorally, diffuse hyperemic macules, papules, and vesicles may be seen.

STEVENS-JOHNSON SYNDROME: A severe form of erythema multiforme characterized by painful oral bullae that rupture; bloody, crusting lips; conjunctivitis; photophobia; and urethritis, balanitis, and/or vaginal ulcers.

ERYTHROMYCIN: A bacteriostatic macrolide group of antibiotics that has both Gram-positive and Gram-negative antibacterial spectra and acts by inhibiting ribosomal protein synthesis.

ERYTHROPLASIA (Erythroplakia): A red, papular, or macular lesion (often ulcerated) of mucous membrane. Can be pre-malignant.

ESCHAR: A slough caused by cauterization or by application of some corrosive substance.

ESTROGEN: A generic term for naturally-occurring steroid hormones containing an estrane nucleus (estrone, estadiol, estriol, etc.); secreted from the testis, ovary, and placenta; stimulates protein anabolic actions and exerts a positive effect on nitrogen balance; regulates the growth and maintenance of female accessory sex organs and secondary sex characteristics; implicated in hormonal, pubertal, and menopausal desquamative gingivitis.

ETIOLOGY: The study of the causes of disease; alternately, the cause of a disease.

EUBACTERIUM BRACHII: Gram-positive, non-motile, anaerobic, pleomorphic bacilli or coccobacilli that occur in pairs of short chains. Found in the oral cavity, they are usually part of the indigenous oral flora.

EUBACTERIUM SSP.: Gram-positive, non-motile anaerobic, rod-shaped bacteria frequently found in subgingival plaque.

EUBACTERIUM TIMIDUM: Gram-positive, non-motile, anaerobic bacilli that are isolated from wounds and other infections and are associated with other anaerobes and facultative bacteria. May be involved in bacteremia and endocarditis.

EVULSION: The sudden tearing out, or away, of tissue due to a traumatic episode. *See:* Avulsion.

EXACERBATION: Increase in the severity of a disease or of any of its signs or symptoms.

EXCISION: A cutting out; removal; the process of amputating or cutting away any portion of the body.

EXFOLIATION: 1. The shedding of something, such as epithelial cells from the surface of the body. 2. In dentistry, the physiological loss of the primary dentition; the loss of implanted materials.

EXOGENOUS: Due to external cause; not arising within the organism.

EXOPHYTIC: Growing outward; proliferation on the exterior or surface of an organ.

EXOSTOSIS: A benign, bony growth projecting outward from the surface of a bone. *See:* Torus.

EXOTOXIN: A toxic substance formed by species of certain bacteria and found outside the bacterial cell.

EXTIRPATION: The complete removal of an organ or tissue.

EXTRAVASATE: To seep or escape from a cavity, vessel, or enclosed area into the surrounding tissues (i.e., blood or lymph).

EXTRINSIC: Derived from or situated without; external.

EXTRUSION: In dentistry, the overeruption or migration of a tooth from its normal occlusal position, as when the contacting tooth in the opposing arch is missing.

EXUDATE: Material such as fluid, cells, and cellular debris that has escaped from blood vessels and is deposited in tissues or on tissue surfaces, usually as a result of inflammation.

FIBRINOUS E.: Characterized by an abundance of fibrinogen resulting in subsequent fibrin formation at the site of injury.

HEMORRHAGIC E.: Characterized by an abundance of red blood cells.

PURULENT E.: Characterized by an abundance of polymorphonuclear leukocytes, resulting in pus formation at the site of injury.

SEROUS E.: Characterized by an abundance of serous fluid of high protein content at the site of injury.

F

FACE-BOW: A device used to record the positional relationship of the maxillary arch to the temporomandibular joints and to orient dental casts in this same relationship to the opening axis of an articulator.

FACET: A flattened or worn spot on the surface of a hard body, as on a bone or a tooth.

FACTITIOUS: 1. Pertaining to a state or situation produced by other than natural means. 2. Self-inflicted.

FACULTATIVE: 1. Voluntary; possessing the power to do or not to do a thing. 2. Capable of existing under different conditions, as a microorganism that can exist in either aerobic or anaerobic conditions.

FAMILIAL: Occurring in members of the same family, as in a familial disease. *See:* Congenital.

FENESTRATE: To pierce with one or more openings.

FENESTRATION: A window-like aperture or opening, such as may be found in the alveolar bone over the root of a tooth.

FESTOONS, GINGIVAL: The contours of the gingiva and oral mucosa over the roots of the teeth that tend to follow the cervical lines. These are prominent in the presence of a thin alveolar process.

FETOR ORIS: Foul, offensive odor from the oral cavity. *See:* Halitosis.

FIBER: A filament or thread. In periodontics the term usually refers to collagenous or elastic connective tissue fibers.

ALVEOGINGIVAL F.: Collagenous fibers that radiate from the bone of the alveolar crest into the lamina propria of the free and attached gingiva.

CIRCULAR F.: Collagenous fiber bundles within the gingiva that encircle the tooth in a ring-like fashion.

DENTOGINGIVAL F.: Numerous collagenous fibers that extend from cervical cementum to the lamina propria of the free and attached gingiva.

DENTOPERIOSTEAL F.: Fibers running from the cementum over the periosteum of the outer cortical plates of the alveolar process where they insert into the alveolar process or muscle in the vestibule of the floor of the mouth.

GINGIVAL F.: *See:* Alveo gingival F. and Dentogingival F.

OXYTALAN F.: Fibers found in all connective tissue structures of the periodontium that appear to consist of thin, acid-resistant fibrils. Their function is unknown.

PRINCIPAL F.: The major fiber groups of the functioning periodontium:

ALVEOLAR CREST F.: Attaches to the cementum just apical to the cemento-enamel junction and run apically and laterally to insert into the surface of the alveolus.

APICAL F.: Radiates from the cementum around the apex of the root to the adjacent bone.

HORIZONTAL F.: Located just apical to the alveolar crest group, these fibers run perpendicular to the long axis of the root from cementum to bone.

INTERRADICULAR F.: Found between the roots of multirooted teeth, these fibers run from the cementum into the crestal bone of the interradicular septum.

OBLIQUE F.: The most numerous fiber group of the periodontal ligament; run from the cementum outwardly and coronally to insert into the bone.

TRANSSEPTAL F.: Collagenous fibers that run interdentially from the cementum just apical to the base of the junctional epithelium of one tooth over the alveolar crest to insert into a comparable region of an adjacent tooth.

FIBEROTOMY: *See:* Gingival Fiberotomy.

FIBROBLAST: The predominant connective tissue cell; a flattened, irregularly-branched cell with a large oval nucleus that is responsible, in part, for the production and remodeling of the extracellular matrix.

FIBROBLAST GROWTH FACTOR: A family of growth factors with mitogenic properties for fibroblasts and mesoderm-derived cell types.

FIBROMA: A benign neoplasm of fibrous connective tissue.

PERIPHERAL OSSIFYING F.: A fibroma, usually of the gingiva, showing areas of calcification or ossification.

FIBROMATOSIS, GINGIVAL: *See:* Gingival Fibromatosis.

FIBRONECTIN: High molecular weight (450 kDa) glycoproteins composed of two disulfide-linked polypeptides; functional domains of the molecule have affinity for cells and the extracellular matrix components; found on cell surfaces, in connective tissues, in the blood, and in other body fluids.

FIBRO-OSSEOUS INTEGRATION: *See:* Integration.

FIBROSIS: A fibrous change of the mucous membranes, especially the gingiva, as a result of chronic inflammation. Fibrotic gingiva may appear outwardly healthy, masking underlying disease.

FILLING, RETROGRADE: An amalgam or other restoration placed in the apical portion of a tooth to

seal the root canal following surgical removal of a periapical lesion and/or the end of the root.

FISSURE: A general term for a cleft or groove.

FISTULA: An abnormal canal joining the cavities of two hollow organs or the cavity of an organ and the surface of the body. *See:* Sinus Tract.

OROANTRAL F.: An abnormal opening between the maxillary sinus and the mouth.

OROFACIAL F.: An abnormal opening between the cutaneous surface of the face and mouth.

ORONASAL F.: An abnormal opening between the nasal cavity and the mouth.

FLAP: A loosened section of tissue separated from the surrounding tissues except at its base.

DOUBLE PAPILLA PEDICLE F.: The use of the papillae on the mesial and distal of a tooth as laterally positioned flaps sutured together over the tooth root.

ENVELOPE F.: A flap retracted from a horizontal linear incision, as along the free gingival margin, with no vertical incision.

GINGIVAL F.: A flap that does not extend apical to the mucogingival junction.

MODIFIED WIDMAN F.: A scalloped, replaced, mucoperiosteal flap, accomplished with an internal bevel incision, that provides access to the root for root planing.

MUCOGINGIVAL F.: A flap that includes both gingiva and alveolar mucosa.

MUCOPERIOSTEAL (Full Thickness) F.: A mucosal flap (usually gingiva and alveolar mucosa) that includes the periosteum.

PAPILLARY PEDICLE F.: A laterally-rotated flap employing the gingival papilla.

PARTIAL, THICKNESS (Split Thickness) F.: A surgical flap of mucosa and connective tissue that does not include the periosteum.

PEDICLE F.: A surgical flap with lateral releasing incisions. *See:* Sliding Flap.

POSITIONED F.: A surgical flap that is moved or advanced laterally, coronally, or apically to a new position.

REPLACED F.: A flap replaced in its original position.

REPOSITIONED F.: *See:* Replaced Flap.

SLIDING F.: A pedicle flap moved to a new position.

FLORA, ORAL: The microorganisms residing within the oral cavity.

FLOW CYTOMETRY: Measures the physical and chemical characteristics of individual cells as they move past optical or electronic sensors; can be used to detect and characterize specific cells in a mixed population; used to determine the effects of drugs, hormones, chemicals, etc., on cell proliferation, growth, and function.

FOOD IMPACTION: The forceful wedging of food into the interproximal space by chewing pressure (vertical impaction) or the forcing of food interproximally by tongue or cheek pressure (horizontal impaction).

FORAMEN: A natural opening or passage, particularly into or through a bone.

FORDYCE'S GRANULES: A developmental anomaly characterized by ectopic sebaceous glands appearing as minute, yellowish papules on the oral mucosa.

FOREIGN BODY: A non-native substance in the tissues or body cavities.

FOREIGN-BODY REACTION: A granulomatous reaction around a foreign material within a tissue or organ; often characterized by giant cells. This may present as acute or chronic gingival inflammation and may produce tattoos; or red, red/white; or suppurative lesions.

FORNIX: Any arch-shaped structure or vault-like space created by that structure, such as the vestibular fornix.

FOSSA: A shallow depression, concavity, or hollow area.

FREE GINGIVAL GROOVE: *See:* Gingival Groove.

FREEWAY SPACE: The space between the maxillary and mandibular teeth when the mandible is suspended in the postural position.

FREEZE-DRYING: *See:* Lyophilization.

FREMITUS: A palpable or visible movement of a tooth when subjected to occlusal forces.

FRENOTOMY: The cutting of a frenulum, especially the release of ankyloglossia.

FRENULECTOMY (Frenectomy): The excision of a frenulum.

FRENULUM: A small band or fold of integument or mucous membrane that checks, curbs, or limits the movements of an organ or part.

ABNORMAL F.: Aberrant insertions of labial, buccal, or lingual frenula capable of retracting gingival margins, creating diastemas, and limiting lip and tongue movements.

LABIAL F.: The fold of mucous membrane connecting the lip and the alveolar process in the midline of both the maxilla and mandible.

LINGUAL F.: The fold of mucous membrane connecting the tongue with the floor of the mouth and the mandibular alveolar process.

FRENUM: *See:* Frenulum.

FRONTAL PLANE: Any plane passing longitudinally through the body from side to side at right angles to the median plane. It divides the body into front and back parts.

FUNCTIONAL SIDE: The side of the body towards which the mandible moves in lateral excursion.

FUNGI: A eucaryotic (nucleated) group of microbes. A phylum of plants whose members are devoid of any pigment capable of photosynthesis; they are unable to synthesize protein or other organic material from simple compounds, and are therefore parasitic or saprophytic. The three major pathologic mycoses or fungal infections involving subcutaneous orofacial sites are Sporotrichosis, Entomophthoromycosis, and Rhinosporidiosis. In immunocompromised individuals, *Candida* species are responsible for oral mycoses and may cause oral infections (thrush) in AIDS patients or other debilitated humans. Designated "opportunistic" pathogens since they are often found as members of the normal oral flora. Most frequently implicated representative is *C. albicans*. Candidiasis attributable to *C. tropicalis*, *C. parapsilosis*, *C. pseudotropicalis*, and *stellatoidea* have also been cultivated from the oral cavity.

FURCATION: The anatomic area of a multirrooted tooth where the roots diverge.

FURCATION INVASION: *See:* Periodontal Bony Defects.

FUSED TEETH: Two or more teeth that are structurally united. *See:* Gemination.

FUSIFORM: A descriptive term of bacterial cell morphology, referring to a spindle or cigar-shaped cell, such as is observed frequently for members of the genera *Fusobacterium* and *Capnocytophaga*.

FUSOBACTERIUM NUCLEATUM: Gram-negative, non-motile, anaerobic, rod-shaped bacteria commonly associated with periodontal disease.

FUSOBACTERIUM SSP.: Gram-negative, nonmotile, anaerobic, rod-shaped bacteria, frequently with "sickle-shaped" morphology, found as part of the indigenous flora of the oral cavity.

FUSOSPIROCHETAL INFECTION: An infection characterized by a predominance of fusiforms and spirochetes.

G

GANGRENE: Death of a mass of tissue, generally associated with loss of vascular (nutritive) supply and followed by bacterial invasion and putrefaction.

GEMINATION: Teeth that are structurally united and have developed from the same tooth germ.

GENE: A segment of a DNA molecule coded for the synthesis of a single polypeptide; a unit of genetic information.

GENOME: The complete chromosomal set derived from one parent.

GENOTYPE: The genetic composition of an individual or defined population.

GEOGRAPHIC TONGUE (Migratory Glossitis):

A condition characterized by chronic, superficial, and circumscribed desquamation of the filiform papillae. The areas of desquamation change continuously.

GERMICIDE: An agent that kills microorganisms.

GINGIVA: The fibrous investing tissue, covered by keratinized epithelium, that immediately surrounds a tooth and is contiguous with its periodontal ligament and with the mucosal tissues of the mouth.

ATTACHED G.: The portion of the gingiva that is firm, dense, stippled, and tightly bound to the underlying periosteum, tooth, and bone.

FREE G.: That part of the gingiva that surrounds the tooth and is not directly attached to the tooth surface.

MARGINAL G.: The most coronal portion of the gingiva. Often used to refer to the free gingiva that forms the wall of the gingival crevice in health.

PAPILLARY G.: *See:* Gingival Papilla.

GINGIVAL: Pertaining to the gingiva.

G. CLEFT: *See:* Cleft, Gingival.

G. COL: *See:* Col.

G. CORIUM: The connective tissue of the gingiva.

G. CRATER: A saucer-shaped defect of the interproximal gingiva.

G. CREST: *See:* Crest.

G. CREVICE (G. Sulcus): The shallow fissure between the marginal gingiva and the enamel or cementum.

G. CUFF: That portion of the gingiva that overlies the junctional epithelium.

G. CURETTAGE: *See:* Curettage, Gingival.

GINGIVAL DISEASES: The pattern of observable signs and symptoms of different disease entities that are localized to the gingiva.

G. D. OF FUNGAL ORIGIN: Gingival manifestations of fungal infections are characterized by white, red, or ulcerative lesions associated with several predisposing conditions.

G. D. OF SPECIFIC BACTERIAL ORIGIN: Conditions induced by exogenous bacterial infection other than common components of dental plaque.

G. D. OF VIRAL ORIGIN: Acute manifestations of viral infections of the oral mucosa, characterized by redness and multiple vesicles that easily rupture to form painful ulcers affecting the gingiva. They may be accompanied by fever, malaise, and regional lymphadenopathy.

G. ENLARGEMENT: An overgrowth or increase in size of the gingiva.

DRUG-INFLUENCED G. E.: Gingival enlargement resulting in whole or in part from systemic drug use.

G. EXUDATE: An exudate that escapes into the oral cavity via the gingival crevice.

G. FESTOON: *See:* Festoons, Gingival.

G. FIBEROTOMY: A circumferential crevicular incision through all gingival and periodontal fibers coronal to the crest of the alveolar bone.

G. FIBROMATOSIS: A diffuse, fibrous overgrowth of the gingiva; can be idiopathic, hereditary, or associated with drug administration.

HEREDITARY G. F.: A genetically derived fibrotic gingival enlargement.

G. FLUID: Tissue fluid that seeps through the crevicular and junctional epithelium. It is increased in the presence of inflammation.

G. GROOVE: A shallow, V-shaped groove or indentation that is closely associated with the apical

extent of free gingiva and runs parallel to the margin of the gingiva. The frequency of its occurrence varies widely.

G. HYPERPLASIA: An enlargement of the gingiva due to an increase in the number of cells.

G. HYPERTROPHY: An enlargement of the gingiva due to an increase in the size of cells.

G. MARGIN: *See:* Gingiva, Marginal.

G. PAPILLA: That portion of the gingiva that occupies the interproximal spaces. The interdental extension of the gingiva.

G. POCKET: A pathologically deepened gingival crevice that does not involve loss of connective tissue attachment. Frequently observed when there is gingival enlargement.

G. RECESSION: *See:* Recession, Gingival.

G. SULCUS: *See:* Gingival Crevice.

GINGIVECTOMY: The excision of a portion of the gingiva; usually performed to reduce the soft tissue wall of a periodontal pocket.

GINGIVITIS: Inflammation of the gingiva.

ASCORBIC ACID DEFICIENCY G.: Inflammatory response of the gingiva to plaque aggravated by chronically low ascorbic acid levels.

DESQUAMATIVE G.: A non-specific term denoting chronic, diffuse inflammation of the gingiva with sloughing of the surface epithelium. Can be found in several mucosal diseases.

DIABETES-ASSOCIATED G.: Inflammatory response of the gingiva to plaque aggravated by poorly controlled plasma glucose levels.

DRUG-INFLUENCED G.: Pronounced inflammatory response of the gingiva to plaque and drug(s).

ERUPTIVE G.: Inflammation accompanying eruption of the teeth.

HORMONAL G.: A generic term describing the changes in color, size, shape, or function of gingiva resulting from the influence of hormones.

HYPERPLASTIC G.: Characterized by markedly enlarged and proliferative margins and interdental papillae.

LEUKEMIA-ASSOCIATED G.: Pronounced inflammatory response of the gingiva to plaque resulting in increased bleeding and enlargement subsequent to leukemia. Enlargement may be partially due to leukemic cell infiltration of the gingiva.

MARGINAL G.: Inflammation limited to the gingiva adjacent to the tooth surface.

MENSTRUAL-CYCLE ASSOCIATED G.:

Pronounced inflammatory response of gingiva to plaque and hormones immediately prior to ovulation.

NECROTIZING ULCERATIVE G (NUG): An infection characterized by gingival necrosis presenting as "punched out" papillae, with gingival bleeding and pain. Fetid breath and pseudomembrane formation may be secondary diagnostic features. Fusiform bacteria, *Prevotella intermedia*, and spirochetes have been associated with the lesion. Predisposing factors may include stress, poor diet, smoking, and HIV infection. *See also:* Periodontitis, Necrotizing Ulcerative.

NON-PLAQUE-INDUCED G.: Gingival inflammation having an etiology other than dental plaque, such as gingival diseases of specific bacterial, viral, fungal, or genetic origin, due to systemic conditions, trauma, foreign body reactions, or other causes.

ORAL CONTRACEPTIVE-ASSOCIATED G.:

Pronounced inflammatory response of the gingiva to plaque and oral contraceptives.

PLAQUE-INDUCED G.: Gingival inflammation resulting from dental plaque

PREGNANCY-ASSOCIATED G.: Pronounced inflammatory response of the gingiva to dental plaque and hormones usually occurring during the second and third trimesters of pregnancy.

PUBERTY-ASSOCIATED G.: Pronounced inflammatory response of gingiva to dental plaque and hormones during the circumpubertal period.

GINGIVOPLASTY: A surgical reshaping of the gingiva.

GINGIVOSIS: Archaic term for desquamative gingivitis.

GINGIVOSTOMATITIS: Inflammation affecting both the gingiva and the oral mucosa.

HERPETIC G.: An infection of the oral soft tissues caused by the herpes simplex virus and characterized by redness, formation of multiple vesicles, painful ulcers, fever, and lymphadenopathy.

GLOSSALGIA: Pain associated with the tongue.

GLOSSITIS, MIGRATORY: *See:* Geographic Tongue.

GLOSSODYNIA: Painful or burning tongue.

GLUCOCORTICOID: A group of C21 steroid hormones (cortisol, etc.) that affect carbohydrate, fat, and protein metabolism; secreted from the adrenal cortex; used in treatment of desquamative gingival lesions in the oral cavity; a corticosteroid.

GLUCOSE TOLERANCE TEST (GTT): A laboratory test that indicates the patient's capacity to regulate blood sugar level following the ingestion of carbohydrate. One of the most reliable laboratory tests for detection of diabetes mellitus.

GLYCOSAMINOGLYCAN: A polysaccharide chain consisting of a hexosamine alternating with another carbohydrate residue; a component of proteoglycans.

GRAFT: 1. Any tissue or organ used for implantation or transplantation. 2. A piece of living tissue placed in contact with injured tissue to repair a defect or supply a deficiency. 3. To induce union between normally separate tissues.

ALLOGRAFT: A graft between genetically dissimilar members of the same species.

ALLOPLAST: A synthetic graft or inert foreign body implanted into tissue. *See:* Implant, Oral.

AUTOGENOUS G.: *See:* Graft, Autograft.

AUTOGENOUS BONE G.: An osseous autograft.

AUTOGRAFT: Tissue transferred from one position to another within the same individual.

DOUBLE PAPILLA PEDICLE G.: *See:* Flap, Double Papilla Pedicle.

HETEROGRAFT: A graft taken from a donor of another species.

HOMOGRAFT: *See:* Allograft.

ILIAC G.: Bone graft material obtained from the iliac crest.

ISOGRAFT: A graft between genetically identical individuals, usually between identical twins.

PAPILLARY PEDICLE G.: *See:* Flap, Papillary Pedicle.

PEDICLE G.: *See:* Flap, Pedicle.

SOFT TISSUE (Gingival) G.: An autogenous graft of masticatory mucosa or collagenous tissue completely or partially detached from its original site and placed in a prepared recipient bed.

XENOGRAFT: A heterograft.

GRAM-NEGATIVE: Pertaining to bacteria that counterstain pale red with Gram stain. These bacteria have a lipopolysaccharide (endotoxin) layer exterior to a thin peptidoglycan layer in their cell walls.

GRAM-POSITIVE: Pertaining to bacteria that stain deep purple with Gram stain. These bacteria have a thick peptidoglycan layer but no lipopolysaccharide in their cell walls.

GRAM STAIN: A method for classifying bacteria into two groups on the basis of their cell wall composition, which causes them to stain either purple (positive) or pale red (negative).

GRANULATION TISSUE: Healing tissue that consists of fibroblasts, capillary buds, inflammatory cells, and edema.

GRANULOCYTOPENIA: *See:* Agranulocytosis.

GRANULOMA: A reactive nodule consisting of modified macrophages resembling epithelial cells surrounded by a rim of mononuclear cells, usually lymphocytes, and often containing giant cells.

APICAL G.: Circumscribed granulomatous tissue adjacent to the apex of a tooth.

CENTRAL GIANT CELL G.: Usually restricted to the jaw bones, this lytic lesion displays loose fibrillar connective tissue, numerous capillaries, and multinuclear giant cells; a histologic appearance similar to the bony lesions of hyperparathyroidism.

PERIPHERAL GIANT CELL G.: Considered an unusual proliferative response of the tissues to injury, this lesion always occurs on the gingiva or alveolar mucosa. Histologically, it is a non-encapsulated mass of delicate connective tissue cells, numerous capillaries, and multinucleated giant cells.

PYOGENIC G.: Localized, painless protuberant, exophytic gingival mass that is attached by a sessile or pedunculated base from the gingival margin or more commonly from an interproximal space.

PREGNANCY-ASSOCIATED P. G.: A pyogenic granuloma resulting from dental plaque and hormones during pregnancy.

GRANULOMATOUS TISSUE: A distinctive morphologic pattern of inflammation consisting of histiocytes that have been transformed into epithelioid cells that are surrounded by mononuclear cells, usually lymphocytes. Seen in the granulomatous diseases, such as tuberculosis, syphilis, sarcoidosis, and leprosy.

GRINDING, SELECTIVE: Alteration of the occlusal forms of teeth to improve occlusal function and to decrease or redirect occlusal forces to the teeth.

GROOVE, PALATAL: A developmental, anomalous groove usually found on the palatal aspect of maxillary central and lateral incisors.

GROUP FUNCTION: Multiple contacts between the maxillary and mandibular teeth in lateral movements on the working side, whereby simultaneous contacts of several teeth act as a group to distribute occlusal forces.

GROWTH FACTORS: A diverse group of polypeptides that have important roles in regulation of growth and development of a variety of organs.

GUARD: *See:* Occlusal Guard.

GUIDANCE: The process of controlling or directing an object on a predetermined course or track.

CANINE G.: Contact guidance provided by canine teeth in lateral mandibular movements. *See:* Canine Protection.

CONDYLAR G.: The path the condyles travel during normal mandibular movement, measured in degrees relative to the Frankfort horizontal plane.

INCISAL G.: The influence on mandibular movements exerted by the palatal surfaces of the maxillary anterior teeth.

GUIDED BONE REGENERATION: *See:* Regeneration, Guided Tissue.

GUIDED TISSUE AUGMENTATION: *See:* Regeneration, Guided Tissue.

GUIDED TISSUE REGENERATION: *See:* Regeneration, Guided Tissue.



HABIT: An act that has become a repeated performance, almost automatic, such as bruxism or tongue thrusting.

PARAFUNCTIONAL H.: Characterized by abnormal function, such as bruxism.

PERNICIOUS H.: Capable of damaging or destroying body tissues.

HAEMOPHILUS: Genus of Gram-negative, non-motile, microaerophilic, pleomorphic bacilli and coccobacilli.

HAIRY LEUKOPLAKIA: *See:* Leukoplakia.

HALF-LIFE (Drug): The amount of time for plasma concentration of a drug to be reduced by 50%.

HALITOSIS: Breath that is offensive to others, caused by a variety of reasons including but not limited to periodontal disease, bacterial coating of tongue, systemic disorders, and different types of food. Also called fetor ex ore, fetor oris, and stomatodysodia.

HAPTEN: Any chemical, drug, or its metabolite, that combines with tissue protein to form a complete antigen; most allergenic drugs are haptens.

HAWLEY APPLIANCE: A removable orthodontic palatal appliance made of wire and acrylic used as a stabilizing appliance, or, with modification, to move teeth. It typically incorporates a labial arch wire and an anterior biteplane.

HEALING: The process of repair or regeneration of injured, lost, or surgically-treated tissue.

H. by FIRST INTENTION: Primary union of a wound in which the incised tissue edges are approximated and held until union occurs.

H. by SECOND INTENTION: Wound closure wherein the edges remain separated and the wound heals from the base and sides via the formation of granulation tissue.

HEALTH: The condition of a patient when there is function without evidence of disease or abnormality.

HEMANGIOMA: A benign blood vessel neoplasm; may occur as capillary or cavernous; soft, painless, red to purple; blanches on pressure.

HEMATOMA: A localized collection of extravasated blood, usually clotted, that forms a mass in a tissue, organ, or space.

HEMIDESMOSOME: An ultrastructural feature found on the basal surface of some epithelial cells forming the site of attachment between the basal surface of the cell and the basement membrane.

HEMISECTION: The surgical separation of a multirrooted tooth, especially a mandibular molar, through the furcation in such a way that a root and the associated portion of the crown may be removed or restored.

HEMISEPTUM: *See:* Periodontal Bony Defects.

HEMOSTASIS: Arrest of hemorrhage.

HEMOSTAT: Any agent, apparatus, or instrument that may be employed to arrest hemorrhage.

HEPARAN SULFATE: A glycosaminoglycan found on the surface of most mammalian cells and in the extracellular matrix.

HEPARIN: A glycosaminoglycan that is attached to a core protein found in mast cells; anticoagulant activity; serves as a catalyst for antithrombin attachment to thrombin.

HEPATITIS: Inflammation of the liver caused by various disease states, drug reactions, and viruses. Common systemic signs include fever, jaundice, and an enlarged liver.

H. A: An infection of the liver caused by the hepatitis A virus. Commonly spread by fecal contamination. It usually occurs in children and young adults and follows a mild course. Immunization is available.

H. B: An infection of the liver caused by the hepatitis B virus. It can be transmitted in the health care environment. Has an insidious onset. Features include anorexia, malaise, nausea, vomiting, abdominal pain, and jaundice. Ultimate outcomes include the carrier state, cirrhosis, acute hepatitis, death and primary liver cancer. Immunization is available.

H. C (Non-A, Non-B): A common form of hepatitis in adults that is caused by at least two different viral agents. This form of hepatitis is principally transmitted by the parenteral route. Persons at increased risk of hepatitis C are parenteral drug users, health care workers with exposure to blood hemodialysis patients, and recipients of blood or blood-blood products. Serological tests will detect anti-hepatitis C by enzyme immunoassay.

H. D (DELTA H.): An infection of the liver dependent on the presence of the hepatitis B virus for clinical expression. It may occur as a co-infection with acute hepatitis B or as a superinfection in a hepatitis B carrier. It occurs primarily through intimate contact and transmucosal exchange of body fluids and is seen most frequently in intravenous drug users and hemophilic patients. Immunization against the hepatitis B virus provides protection against hepatitis D infection.

HEREDITARY GINGIVAL FIBROMATOSIS:

See: Fibromatosis, Gingival.

HERPES (Herpetic Gingivostomatitis, H.

Simplex): An acute infection of the oral mucosa by the herpes simplex virus (usually Type 1) that is characterized by redness and multiple vesicles that

easily rupture to form painful ulcers. It may be accompanied by fever, malaise, and regional lymphadenopathy.

H. LABIALIS: An attenuated form of herpes found on the vermilion border of the lips. Commonly called cold sores or fever blisters.

H. ZOSTER: *See:* Varicella Zoster.

INTRAORAL RECURRENT H.: An attenuated form of herpes in which clusters of pinhead-sized vesicles occur on the attached keratinized mucosa. Commonly called cold sores or fever blisters.

HERPES SIMPLEX VIRUSES TYPE I, TYPE II:

Herpes viruses are the most ubiquitous, communicable, infectious viruses in humans. They are double stranded DNA viruses with icosahedral nucleocapsids. Herpes simplex viruses cause acute infection or latent and recurrent infection of human tissues. Herpes simplex virus type I usually causes oral lesions, while type II usually causes genital infections. Herpes simplex virus II is also associated with carcinoma of the cervix.

HERTWIG'S EPITHELIAL ROOT SHEATH:

An extension of the enamel organ (cervical loop) Determines the shape of the roots and initiates dentin formation during tooth development. Its remnants persist as epithelial rests of Malassez in the periodontal ligament.

HINGE AXIS: Imaginary line around which the mandible may rotate through the sagittal plane.

HISTAMINE: A low molecular weight, bioactive amine that causes smooth muscle contraction of bronchioles, increased capillary permeability, and increased secretions by the nasal and bronchial mucous glands. Released primarily from mast cells and basophils.

HISTIOCYTE: A large phagocyte (macrophage) present in connective tissue that has important antigen processing, immunoregulatory, and phagocytic properties.

HISTOLOGY: That part of anatomic study that deals with the minute structure, composition, and function of the tissues.

HISTOPATHOLOGY: The study of pathological changes within the structures of tissues at the microscopic level.

HIV: *See:* Human Immunodeficiency Virus.

HORIZONTAL OVERLAP: Overjet. The projection of the maxillary anterior or posterior teeth beyond their antagonists in a horizontal direction. *See:* Overbite.

HORMONE: Chemical messengers that are secreted into the blood stream by specialized cells capable of synthesizing and secreting them in response to specific signals.

HOST RESISTANCE: Host defensive mechanisms.

HUMAN IMMUNODEFICIENCY VIRUS (HIV): A RNA virus that exists as two major types, HIV-I and HIV-2. The genetic material is in the form of messenger RNA and is classified as a retrovirus. The targets of infection of HIV are primarily the T4 helper (CD4+) lymphocytes but it is also clear that macrophages can be infected. The virus appears to cause AIDS (acquired immune deficiency syndrome). *See:* AIDS.

HYDROXYAPATITE (HA): An inorganic compound, $\text{Ca}(\text{PO}_4)_6(\text{OH})_2$, found in the matrices of bone and teeth which provides rigidity to these structures. Synthetic forms are used in ridge augmentation and intrabony defects, and for coating dental implants.

HYPERCEMENTOSIS: An excessive deposition of cementum.

HYPEREMIA: An excessive accumulation of blood in a tissue due to vascular engorgement.

HYPERGLYCEMIA: Abnormally increased blood sugar.

HYPERKERATOSIS: Excessive formation of keratin by epithelial cells.

HYPERMINERALIZATION: The presence of unusual amounts of mineral elements in a calcified tissue.

HYPERORTHOKERATOSIS: An abnormal increase in the thickness of the orthokeratin layer (stratum corneum) of the epithelium. The subjacent stratum granulosum may be prominent.

HYPEROSTOSIS: A localized overgrowth of bone. *See also:* Exostosis and Torus.

HYPERPARAKERATOSIS: An abnormal increase in the thickness of the keratin layer of the epithelium with

persistence of nuclei or nuclear remnants. The stratum granulosum is seldom seen in hyperparakeratosis.

HYPERPLASIA: The increase in the size of a structure due to an increase in the number of cells.

HYPERSENSITIVITY: An exaggerated immune response to a foreign substance.

HYPERTROPHY: The enlargement or overgrowth of an organ or part due to an increase in size of its constituent cells.

HYPOPHOSPHATASIA: An inborn error of metabolism characterized by deficient alkaline phosphatase in serum and bone, resulting in the defective formation of bone and cementum.

HYPOPLASIA: Defective or incomplete development.

I

IATROGENIC: An abnormal mental or physical condition induced in a patient by the effects of treatment.

IDIOPATHIC: Of unknown causation.

IMMOBILIZATION, TOOTH: Any procedure that renders a tooth fixed or non-mobile. In periodontics, it refers to splinting of teeth.

IMMUNITY: All mechanisms used by the body as protection against environmental agents that are foreign to the body.

ACQUIRED I.: A specialized form involving antibodies and lymphocytes.

INNATE I.: Congenital.

IMMUNOCOMPETENCE: The ability or capacity to develop an immune response.

IMMUNOFLUORESCENT MICROSCOPY: A process in which cells or tissues are labeled with fluorescent dye-conjugated antibodies and examined with an ultraviolet light microscope. Used to identify certain structures or markers on cells.

IMMUNOGLOBULIN: A glycoprotein composed of "heavy" and "light" peptide chains; functions as antibody in serum and secretions. There are five major classes (IgG, IgA, IgM, IgE, and IgD), each with specialized functions.

IMPACTED TOOTH (Impaction): An unerupted or partially erupted tooth so positioned that complete eruption is unlikely.

IMPINGEMENT: An area of displacement or compression of a tissue.

IMPLANT ABUTMENT: That part of an implant system that connects the implant with a prosthesis or other device.

IMPLANT FIXTURE: A synonym for an implant, especially an endosseous implant.

IMPLANT, ORAL: 1. An alloplastic material or device that is surgically placed into the oral tissue beneath the mucosal or periosteal layer or within the bone for functional, therapeutic, or esthetic purposes. 2. To insert a graft or alloplastic device into the oral hard or soft tissues for replacement of missing or damaged anatomical parts, or for stabilization of a periodontally compromised tooth or group of teeth.

BLADE I.: A flat, blade-shaped endosseous implant which derives its support from a horizontal length of bone. Most commonly made of metal, it can be perforated, smooth, fluted, textured, coated, wedge-shaped, and/or multi-headed.

ENDODONTIC-ENDOSSEOUS I.: A pin that fits into a root canal and extends beyond the apex into the bone.

ENDOSSEOUS I.: An implant placed into the alveolar process and/or basal bone that supports a prosthesis or other device.

ENDOSTEAL I.: *See:* Endosseous I.

FIBRO-OSSEOUS (Fibro-Osteal) INTEGRATED I.:

An implant with a fibrous connective tissue layer between it and the surrounding bone.

OSSEOINTEGRATED I.: A direct structural and functional connection between ordered, living bone and the surface of an immobile, load-bearing implant as detected on a light microscopic level.

RAMUS FRAME I.: A full arch implant of tripodial design consisting of a horizontal supragingival connecting bar with endosseous units placed into the two rami and symphyseal area.

ROOT-FORM I.: An endosseous implant that derives its support from a vertical length of bone. Most commonly made of metal, it can be cylindrical, tapered, threaded, coated, smooth, textured, perforated, solid, and/or hollow.

SUPERIOSTEAL I.: An implant placed on the surface of the maxillary or mandibular bone for support and attachment of a prosthesis.

IMPLANT SURGERY: *See:* Surgery, Implant.

IMPRESSION: A reproduction in a negative form of areas of the oral cavity.

INCIPIENT: Beginning to exist; coming into existence.

INCISAL GUIDANCE: *See:* Guidance, Incisal.

INCISION: A cut or surgical wound made by a knife, electrosurgical scalpel, laser, or other such instrument.

EXTERNAL BEVEL I.: Reduces the thickness of the mucogingival complex from the outside surface, as in a gingivectomy.

INTERNAL (Inverse, Reverse, or Inverted) BEVEL I.: Reduces the thickness of the mucogingival complex from the sulcular side.

RELEASING I.: Made to enhance the mobility of a periodontal flap.

INCISION AND DRAINAGE: The surgical procedure of incising a lesion to permit the release or removal of an exudate.

INCLINED PLANE: Any one of the inclined cuspal surfaces of a tooth.

INDEX: 1. An ordinal and arbitrary system of measurement which describes or quantitates a condition. Such indices are appropriate for use in an individual patient or for epidemiological studies. 2. A mold used to record the relative position of a tooth or implant to its surroundings, or implants or teeth to one another or to a cast.

INDUCTION: The act or process of causing to occur as induction of bone formation.

INDURATED: Hardened; made hard.

INFECTION: Invasion of the body tissues by pathogenic microorganisms.

ENDOGENOUS I.: Due to activation of organisms previously present in a dormant focus.

EXOGENOUS I.: Caused by organisms acquired from sources other than the host's own flora.

INFECTIOUS: Caused by or capable of being communicated by infections; infective.

INFLAMMATION: A localized protective response elicited by proximate microbes and/or tissue injury,

which serves to destroy, dilute, or wall off both the injurious agent and the injured tissue. A cellular and vascular reaction of tissues to injury.

INITIAL OCCLUSAL CONTACT: The first contact of opposing teeth on closure of the mandible.

IN SITU: In the proper position without invasion of neighboring tissues; in place.

INSULIN: A protein secreted from the beta cells of the pancreas responsible for the uptake of glucose into cells, and stimulation of protein synthesis and lipid synthesis in fat cells.

INTEGRATION: The act of making into a whole by bringing all parts together.

BIOINTEGRATION: A bonding of living bone to the surface of an implant which is independent of any mechanical interlocking mechanism.

FIBRO-OSSEOUS (Fibro-Osteal) I.: The interposition of healthy dense collagenous tissue between implant and bone.

OSSEOINTEGRATION: A direct contact, on the light microscopic level, between living bone tissue and an implant.

INTEGRINS: Heterodimeric membrane proteins consisting of an α and a β subunit. These proteins function as cell surface receptors for cellular adhesion. Sixteen integrins have been identified.

INTERALVEOLAR: Located between the alveoli.

I. SEPTUM: Alveolar and trabecular bone between contiguous teeth.

I. CREST: The coronal edge of the interdental bony septum.

INTERARCH DISTANCE: The vertical distance between maxillary and mandibular teeth at any given degree of jaw opening.

INTERCELLULAR: Occurring between cell boundaries.

INTERCEPTIVE OCCLUSAL CONTACT: *See:* Deflective Occlusal Contact.

INTERCUSPAL POSITION: That position in which the maxillary and mandibular teeth make maximum intercuspation.

INTERCUSPATION: 1. The cusp-to-fossa relationship of the maxillary and mandibular posterior teeth to each other. 2. The interdigitation of cusps of opposing teeth.

INTERDENTAL: Situated between the proximal surfaces of teeth in the same dental arch.

I. BRUSH: An instrument with bristles used to clean the proximal surfaces of adjacent teeth.

I. CANALS: Vascular channels in the interdental bone.

I. GINGIVA: That portion of the gingiva that occupies the interdental area. *See:* Gingival Papilla.

I. SEPTUM: That portion of the alveolar process between adjacent teeth.

I. SPACE: The space between adjacent teeth in the same arch.

I. STIMULATION: Massage of the gingiva of the interdental area.

INTERDIGITATION: The interlocking or fitting of opposing parts, as the cusps of the maxillary and mandibular posterior teeth.

INTERFERENCE: A tooth contact that interferes with harmonious mandibular movement.

INTERFURCATION: The area between and at the base of the roots of a multi-rooted tooth.

INTERLEUKINS: A family of potent proteins that serves as a link between inducer and effector cells during immune and inflammatory responses; involved in the recruitment of immune and inflammatory precursor cells. Some interleukins have been implicated in the pathogenesis of periodontal diseases.

INTERMAXILLARY: Between the jaws.

INTEROCCLUSAL: Between the occlusal surfaces of opposing teeth.

INTEROCCLUSAL CLEARANCE (Freeway Space): The space between the maxillary and mandibular opposing teeth when the mandible is suspended in postural (rest) position.

INTERPROXIMAL: *See:* Interdental Space.

INTERRADICULAR: Between the roots of teeth.

INTERSTITIAL: Situated between parts or in the interspaces of a tissue.

INTRABONY: Within a bone; also termed "infrabony." *See:* Periodontal Bony Defects.

INTRACORONAL: Within the crown of a tooth.

INTRAOSSEOUS: Within a bone.

IN VITRO: Within a glass; observable in a test tube; in an artificial environment; i.e., laboratory.

IN VIVO: Within a living body.

IONTOPHORESIS: The act or process of introducing therapeutic agents into tissues using an electrical current or electrochemical gradient.

IRRIGATION: The act of flushing an area with water or medicinal solution.

IRRITANT: An agent capable of inducing functional derangements or organic lesions in tissues.

ISCHEMIA: Deficiency of blood in a part due to functional constriction or actual obstruction of a blood vessel.

ISOLATE: A population of living organisms obtained in pure culture.

ISOMETRIC: *See:* Contraction, Isometric.

ISOTONIC: *See:* Contraction, Isotonic.

I. SOLUTION: One having osmotic pressure equal to that of blood.

J

JAW RELATION: Any relation of the mandible to the maxilla. *See:* Centric Relation; Occlusion, Centric.

ECCENTRIC J. R.: Any jaw relation other than centric relation.

MEDIAN J. R.: Any jaw relation when the mandible is in the median sagittal plane.

PROTRUSIVE J. R.: A jaw relation resulting from an anterior positioning of the mandible.

REST J. R.: The habitual postural jaw relation when the head is in an upright position and the condyles are in neutral, unstrained positions in the glenoid fossae.

RETRUSIVE J. R.: A jaw position resulting from a posterior positioning of the mandible.

JOINT: The junction between two or more skeletal bones that usually allows for the movement of one or more bones.

JOINT, TEMPOROMANDIBULAR: *See:* Temporomandibular Joint.

JUNCTION: A place of meeting or coming together, as of two different tissues.

CEMENTO-DENTINAL J.: The area of union of the dentin and cementum.

CEMENTO-ENAMEL J.: The area of union of the cementum and enamel at the cervical region of the tooth.

DENTINOENAMEL J.: The area of union of the dentin and enamel.

MUCOGINGIVAL J.: The area of union of the gingiva and alveolar mucosa.

JUNCTIONAL EPITHELIUM: *See:* Epithelium, Junctional.

JUVENILE PERIODONTITIS: *See:* Periodontitis, Aggressive

JUXTAPOSITION: In apposition; contiguous; placed side by side.

K

KAPOSI'S SARCOMA: An infectious granuloma or a reticuloendothelial hyperplasia that may be neoplastic in nature. Clinically, multiple reddish or brownish-red nodules can involve the skin, oral mucosa, visceral organs, and lymph nodes. Usually related to immunocompromised states such as AIDS.

KERATINS: A multigene family of approximately 30 proteins that form the intermediate filaments of the epithelial cell cytoskeleton.

KERATOSIS: Any keratinous growth, such as a wart or callus.

L

LABIOVERSION: Any deviation from the normal arrangement of the dental arch toward the lip.

LACERATE: To mangle; to tear; to cut so that the margin is irregular.

LACTOBACILLUS SSP.: Gram-positive, motile, anaerobic, rod-shaped bacteria implicated as a major contributor to caries progression.

LACUNA: A depression; a hollow space.

LAMELLA: A thin layer, plate, or scale, as of bone.

CEMENTAL L.: One of the layers of cementum.

LAMINA: A thin layer or stratum of bone or any other tissue. A layer of composite structure.

LAMINA DURA: The layer of compact bone forming the wall of a tooth alveolus. Also known as the alveolar bone proper.

CRESTAL L. D.: The layer of compact bone at the alveolar crest.

LAMINA PROPRIA: In mucous membrane, the connective tissue coat just beneath the epithelium and the basement membrane. In skin this layer is known as the dermis.

LAMININ: A high molecular weight glycoprotein composed of three polypeptide chains that are organized in a cross-like manner; functional domains of this molecule have affinity for cell surface receptors and extracellular matrix components; a principal component of the basal lamina.

LANCINATING PAIN: A sharp, cutting pain, usually intermittent and often periodic.

LASER: Acronym for Light Amplification by Stimulated Emission of Radiation. A device that transforms light of various set frequencies into an extremely intense, small, and nearly non-divergent beam of monochromatic radiation in the visible region with all the waves in-phase. Capable of mobilizing immense heat and power when focused at close range, it is used as a tool in surgical procedures, diagnosis, and physiologic studies.

LEPTOTRICHIA SSP.: Gram-negative, non-motile, anaerobic, rod-shaped bacteria found in marginal and subgingival plaque.

LESION: 1. An injury or wound. 2. Any single patch or area of morbid tissue. 3. A pathologic disturbance of a tissue, or organ, which results in impairment, loss of continuity, or loss of normal function of the part.

CHEMICALLY INDUCED L.: Results from local application of substances that may include aspirin, cocaine, pyrophosphates, detergents (e.g., sodium lauryl sulfate), smokeless tobacco, betel nut, and bleaching agents.

TRAUMATIC L.: Self-inflicted (factitious), accidental, or iatrogenic injuries. They may manifest as recession, abrasions, ulcerations, lacerations, burns, edema, erythematous or white lesions, or combinations of several of these features.

LEUKEMIA: A generalized neoplastic disorder of the blood-forming tissues, primarily those of the leukocyte series.

LEUKOCIDIN: *See:* Leukotoxin.

LEUKOPENIA: Reduction in the number of leukocytes in the blood below 5000 per cubic mm. *See:* Neutropenia; Agranulocytosis.

LEUKOPLAKIA: A non-specific white patch in the oral cavity which will not rub off.

HAIRY L.: A corrugated, white plaque of the oral mucosa, primarily on the lateral borders of the tongue, that contains the Epstein-Barr virus. Most patients with confirmed hairy leukoplakia are infected with the human immunodeficiency virus (HIV).

LEUKOTOXIN: A toxin produced by certain bacteria, including *Actinobacillus actinomycetemcomitans*, which is toxic to leukocytes, particularly polymorphonuclear leukocytes.

LEUKOTRIENES: A group of potent biologic mediators of inflammation consisting of 20 carboxylic acids with at least two oxygen substitutes and three double bonds; derived from arachidonic acid by the lipoxygenase pathway; mediator of inflammatory reactions. Leukotrienes C, D, and E are the constituents of the slow reacting substance of anaphylaxis (SRSA). Leukotriene B stimulates neutrophil functions and regulates some lymphocyte functions.

L-FORMS: Bacterial cells, lacking cell walls, which are able to grow and divide. Frequently confused with *Mycoplasma ssp.*, L-forms may sometimes be spontaneously produced or chemically induced by the addition of specific agents, such as penicillin, to actively growing cultures.

LICHEN PLANUS: An inflammatory mucocutaneous disorder characterized by discrete skin papules with a keratinized covering which often appears in the form of adherent scales. Oral lesions with characteristic radiating white striae are common and sometimes the only manifestation. Three types of oral lichen planus have been reported: 1) atrophic or annular (most common); 2) hypertrophic or nodular; and 3) ulcerative or erosive.

LIGAMENT: A band of fibrous tissue that connects bones and cartilages, serving to support and strengthen joints.

PERIODONTAL L.: *See:* Periodontal Ligament; Fibers.

LIGATE: To tie or bind, usually in the therapeutic sense, for the purpose of stopping bleeding or immobilizing a structure.

LIGATION, TEETH: The binding together of teeth with ligatures for stabilization and immobilization. *See:* Splint.

LIGATURE: 1. Any substance, such as gut, nylon, silk, or wire, used to tie an object or strangulate a part. 2. A wire or other material used to secure an orthodontic attachment.

LINGUOCCCLUSION: An occlusion in which a tooth or group of teeth is located lingually to its normal position.

LINGUOVERSION: Displacement of a tooth lingually from the characteristic alignment of the dental arch.

LIPOPOLYSACCHARIDE: A major component of Gram-negative bacterial cell walls; consists of three subunits: lipid A, core polysaccharide, and "O" polysaccharide side chains; has numerous biologic activities such as activation of complement. Often termed "endotoxin."

LOADING DOSE: An initial dose given at the beginning of treatment, that is larger than subsequent doses, administered with the intent of achieving the target concentration rapidly.

LUXATION: 1. Dislocation or displacement. 2. Partial or complete dislocation of a tooth from its alveolus.

LYMPHOCYTE: A spherical cell of the lymphoid series, 7 to 20 μm in diameter with a large, round nucleus and scant cytoplasm. It is the principal cell involved in the immune response. There are two major populations, T- (or thymus-dependent) lymphocytes and B- (or bursa-equivalent) lymphocytes. B-lymphocytes may differentiate and become antibody producing plasma cells, while T-lymphocytes are involved in a variety of cell-mediated immune reactions.

LYMPHOKINE: Soluble factors released from lymphocytes that transmit signals for growth and differentiation of various cell types.

LYMPHOTOXIN: A lymphokine that results in direct cytolysis following its release from stimulated lymphocytes; also termed tumor necrosis factor beta.

LYOPHILIZATION: Isolation of a solid substance from a solution by freezing the solution and sublimating the ice under a vacuum.

LYSIS: The process of cell dissolution; the action of a lysin.

LYSOSOMES: Intracellular cytoplasmic vesicles filled with hydrolytic enzymes; especially prominent

in phagocytic cells such as polymorphonuclear leukocytes and macrophages.

LYSOZYME: The cationic low molecular-weight enzyme present in tears, saliva, and nasal secretion that kills susceptible bacteria by breaking down their cell walls.



MACROPHAGE: A large phagocytic cell of the monocyte series. Important as an antigen-presenting cell and as a producer of certain cytokines such as interleukin-1 and gamma interferon.

MACULA, MACULE: A small spot, perceptibly different in color from the surrounding tissue. It is neither elevated nor depressed from the surface.

MAINTENANCE, PERIODONTAL: *See:* Periodontal Maintenance Procedures.

MALALIGNMENT, DENTAL: The displacement of a tooth from its normal position in the dental arch.

MALIGNANT: In the case of a neoplasm, having the properties of anaplasia, invasion, and metastasis.

MALOCCLUSION: Any deviation from a physiologically-acceptable relationship of opposing teeth.

ANGLE'S CLASSIFICATION OF MALOCCULSION: A classification of different types of malocclusion based on the anteroposterior relationship of the dental arches.

CLASS I (NEUTROCCLUSION): The normal mesiodistal relation of the maxillary and mandibular teeth with the mesiobuccal cusp of the maxillary first permanent molar occluding in the buccal groove of the mandibular first permanent molar. For there to be a malocclusion, an internal derangement (e.g., crowding) must occur in one of the arches.

CLASS II (Distocclusion): The dental relationship wherein the mandibular dental arch is posterior to the maxillary arch; the mandibular first molar is located distal to that seen in neutroclusion.

DIVISION 1: Labioversion of the maxillary incisor teeth.

SUBDIVISION: Unilateral condition.

DIVISION 2.: Linguoversion of the maxillary central incisors.

SUBDIVISION: Unilateral condition.

CLASS III (Mesiocclusion): The dental relationship wherein the mandibular dental arch is anterior to the maxillary arch; the mandibular first molar is located mesial to that seen in neutroclusion.

SUBDIVISION: Unilateral condition.

MANDIBULAR AXIS: *See:* Axis.

MANDIBULAR GLIDE: The side-to-side, protrusive, and intermediate movements of the mandible occurring when the teeth or other occluding surfaces are in contact.

MARGINAL: Pertaining to or connected with a margin or border.

M. GINGIVA: *See:* Gingiva.

M. RIDGE: A ridge of tooth structure forming the occlusoproximal margin of a premolar or molar.

MARROW: The soft material rich in fat, connective tissue fibers, and cells that fills the cavities of bones.

MASSAGE: The act of manipulating soft tissue in the hope of increasing circulation and keratinization, and enhancing tissue tone. Data documenting the treatment efficacy of this procedure is not currently available.

GINGIVAL M.: The application of frictional, compressional, rubbing, and stroking forces to the gingiva.

MAST CELL: A tissue cell, often found around blood vessels, which produces histamine, heparin, leukotrienes, and platelet activation factor. Important in immediate hypersensitivity reactions.

MASTICATION: The process of chewing food in preparation for swallowing and digestion.

MASTICATORY MUCOSA: *See:* Mucosa.

MASTICATORY SYSTEM: The organs and structures functioning in mastication, including the jaws, teeth with their supporting structures, temporomandibular articulation, mandibular musculature, tongue, lips, cheeks, oral mucosa, and associated nervous system.

MATERIA ALBA: Loosely adherent, white curds of matter composed of dead cells, food debris, and other components of the dental plaque found on the tooth.

MELANIN: The dark, amorphous pigment of the skin, hair, various tumors, the choroid coat of the eye, and substantia nigra of the brain.

MELANOMA: A neoplasm made up of melanin-pigmented cells. When used alone, the term refers to malignant melanoma.

MELANOPLAKIA: Pigmented patches on the oral mucosa.

MEMBRANE: A thin, sheet-like layer of tissue that lines a cavity, envelops a vessel or part, or separates a space or organ. *See:* Mucosa.

PERIODONTAL M: A thin sheet-like usually non-autologous material used in various periodontal regenerative procedures. *See:* Periodontal Ligament.

MENISCAL DISPLACEMENT: *See:* Temporomandibular Disorders; Internal Derangement.

MENISCUS: The fibrocartilaginous articular disk of the temporomandibular joint.

MESIOVERSION: The location of a tooth nearer than normal to the median line of the face along the dental arch.

METAPLASIA: A change from one adult cell type to another form which is not normal to that tissue.

METASTASIS: Transfer of disease from one body part or organ to another not directly connected to it. Classically, the transfer of cells, as in malignant tumors, or the transfer of pathogenic microorganisms.

METRONIDIZOLE: An antibiotic with a spectrum confined to obligate anaerobes, some microaerophilic organisms, and some anaerobic protozoa that acts to damage or inhibit DNA synthesis; may induce a disulfiram-like reaction.

MICROAEROPHILIC: Refers to bacteria that grow under conditions of reduced oxygen concentration. Used to describe conditions in which the oxygen concentration is lower than atmospheric levels.

MICROBIAL RESISTANCE: The ability of microorganisms to resist the effects of antibiotics; usually due to chromosomal mutation or the transfer of resistant genes from already resistant organisms; mechanisms include antibiotic enzymatic destruction (beta-lactamases), altered receptor sites (penicillin-binding proteins), efflux of the antibiotic from the organism, or altered metabolic pathways.

MICROBIOTA: The microscopic living organisms of a region.

MICROORGANISM: A microscopic organism; those of medical interest include bacteria, viruses, fungi, yeasts, and protozoa.

MIGRATION, PATHOLOGIC DENTAL: The movement of a tooth out of its former position when the etiology or etiologies responsible for such movement are associated with a disease process.

MINERAL CORTICOID: A group of C21 steroid hormones (aldosterone, etc.) that regulates electrolyte and water balance in the kidney; secreted from the adrenal cortex; a corticosteroid.

MINERALIZE (Calcify): The precipitation of calcium and other salts into an organic matrix to form a hard deposit, such as dental calculus.

MINIMUM BACTERICIDAL CONCENTRATION (MBC): The minimum concentration of an antimicrobial agent required to kill a pure population of bacteria in vitro.

MINIMUM INHIBITORY CONCENTRATION (MIC): The minimum concentration of an antimicrobial agent required to inhibit the growth and/or reproduction of a pure population of bacteria in vitro.

MITOGEN: A substance that causes DNA synthesis, blast transformation, and mitosis in lymphocytes.

MOBILITY, TOOTH: The movement of a tooth in its socket resulting from an applied force.

MONOCYTE: A blood-borne precursor of tissue macrophages.

MORBIDITY: The condition of being diseased.

MOUTH BREATHING: The process of breathing primarily through the oral cavity rather than the nasal passages. May be associated with gingival enlargement and inflammation.

MOUTH GUARD: A removable dental appliance used to protect the teeth and investing tissues during contact sports. *See:* Occlusal Guard.

MUCOBUCCAL FOLD: The cul-de-sac formed where the mucous membrane is reflected from the mandible or maxilla to form the cheek.

MUCOGINGIVAL: The portion of the oral mucosa that covers the alveolar process including the gingiva (keratinized tissue) and the adjacent alveolar mucosa.

M. DEFORMITY: A departure from the normal dimension and morphology of, and/or inter-relationship between gingiva and alveolar mucosa; the abnormality may be associated with a deformity of the underlying alveolar bone.

M. JUNCTION: The junction of the gingiva and the alveolar mucosa. *See:* Junction, Mucogingival.

M. SURGERY: *See:* Surgery, Mucogingival.

M. THERAPY: Correction of defects in morphology, position, and/or amount of soft tissue and underlying bone

MUCOLABIAL FOLD: The line of flexure of the oral mucous membrane as it passes from the mandible or maxilla to the lip.

MUCOPERIOSTEUM, ORAL: The complex of mucous membrane and periosteum that surrounds and invests the maxilla, mandible, and teeth.

MUCOSA: A mucous membrane.

ALVEOLAR M.: Mucosa covering the basal part of the alveolar process and continuing without demarcation into the vestibular fornix and the floor of the mouth. It is loosely attached to the periosteum and is movable.

MASTICATORY M.: The gingiva and the mucosal covering of the hard palate.

ORAL M.: The tissue lining the oral cavity.

MUCOSITIS: Inflammation of a mucous membrane.

MUCUS: The clear, viscous secretion of the mucous membranes, composed of secretions of the glands, along with various inorganic salts, desquamated cells, and leukocytes.

MURAMIDASE: *See:* Lysozyme.

MYALGIA: Pain in a muscle or muscles.

MYCOPLASMA SSP.: Small cell intermediate in physiologic properties between bacteria and viruses, lacking a cell wall but able to grow and multiply. Able to agglutinate red blood cells and sometimes found in association with human periodontal disease.

MYCOTIC: Referring to an infection or lesion caused by a fungus.

MYOFASCIAL PAIN DYSFUNCTION SYNDROME (MPD): A collection of medical and dental conditions affecting the temporomandibular joint (TMJ) and/or muscles of mastication and other

contiguous tissue components. *See:*
Temporomandibular Disorders (TMD).

MYOFUNCTIONAL: Relating to the function of muscles. In dentistry, relates to the role of muscle function in the cause or correction of orthodontic problems or the treatment of muscle-related problems.

MYOSITIS: Inflammation of a muscle.



NARRATIVE REPORT: A complete description of the findings, diagnosis, and therapy for a given patient.

NASMYTH'S MEMBRANE: Primary enamel cuticle. A delicate membrane that briefly covers the crowns of newly erupted teeth. Consists of ameloblasts of the reduced enamel epithelium attached to the enamel by a basal lamina.

NECROSIS: The death of one or more cells, or a portion of a tissue or organ; typically characterized by pyknosis (shrunken and darkly basophilic nuclear staining), karyolysis (swollen and pale basophilic nuclear staining), or karyorrhexis (nuclear rupture or fragmentation).

NECROTIZING ULCERATIVE GINGIVITIS:
See: Gingivitis, Necrotizing Ulcerative.

NECROTIZING ULCERATIVE PERIODONTITIS: *See:* Periodontitis, Necrotizing Ulcerative.

NEGATIVE PREDICTIVE VALUE: The proportion of negative responses to a diagnostic test for a disease that are accurate indicators of the true absence of the malady in a population. Expressed arithmetically as a proportion which is calculated as the number of true negative responses divided by the sum of true negative responses plus false negative responses, i.e., Negative predictive value = $TN/(TN+FN)$.

NEISSERIA SSP.: Gram-negative, non-motile, microaerophilic cocci found as part of the indigenous oral flora.

NEOPLASM: A new, abnormal, uncontrolled growth arising from a given tissue.

NEURALGIA: Paroxysmal pain that extends along the course of one or more nerves.

NEURITIS: Inflammation of a nerve.

NEUTROCCLUSION: *See:* Malocclusion.

NEUTROPENIA: An abnormal decrease in the number of circulating neutrophils. It may be cyclic in nature. *See:* Agranulocytosis.

NEUTROPHIL: The predominant polymorphonuclear leukocyte comprising up to 70% of the peripheral white blood cells. It is important in infection and injury repair, and may have impaired function in some forms of early onset periodontitis.

NEVUS: 1. A pigmented or non-pigmented lesion on the skin or mucosa, which may undergo malignant transformation. 2. Birthmark; a circumscribed malformation of the skin, especially if colored by hyperpigmentation or increased vascularity. 3. A benign, localized overgrowth of melanocytes in the skin early in life.

NIDUS: 1. The point of origin or focus of a morbid process. 2. Nucleus.

NIFEDIPINE: A coronary vasodilator drug that may be associated with gingival overgrowth.

NIGHT GUARD: *See:* Occlusal Guard.

NIKOLSKY'S SIGN: Occurs when the apparently normal, superficial layer of skin or oral mucosa may be rubbed off with slight trauma. Originally associated with pemphigus vulgaris, but can be seen in several bullous conditions.

NODULE: A small, solid, collection of tissue.

NOMA: Rapid spreading gangrene of oral tissues; associated with debilitated or nutritionally deficient patients. Fusospirochetal organisms have been implicated in this condition.

NON-FUNCTIONAL SIDE: The side away from which the mandible moves during lateral excursions.

NOXIOUS: A deleterious or harmful substance; not wholesome.

NUTRITION: The process of assimilating food.



OBLIGATE: Essential; not facultative; limited to a single life condition; able to survive only in a

particular environment or to assume only a particular role, as an obligate anaerobe.

OBLIQUE FIBERS: *See:* Fiber, Principal.

OBTUNDENT: An agent or remedy that lessens or relieves sensibility or pain. Soothing, deadening, dulling.

OBTURATOR: A structure that closes an opening, such as a prosthetic appliance used to close an opening in the palate.

OCCLUDE: 1. To bring together; to shut. 2. To bring or close the mandibular teeth into contact with the maxillary teeth.

OCCLUSAL: Pertaining to the contacting surfaces of opposing teeth.

O. ADJUSTMENT (O. EQUILIBRATION or SELECTIVE GRINDING): Reshaping the occluding surfaces of teeth by grinding to create harmonious contact relationships between the upper and lower teeth.

O. ANALYSIS: A systematic examination of the masticatory system with special consideration of the effect of occlusion on the teeth and their related structures.

O. DISHARMONY: Contacts of opposing surfaces of teeth that are not in harmony with each other or with the anatomic and physiologic control of the mandible. *See:* Deflective Occlusal Contact; Occlusal Interference.

O. EMBRASURE: The interdental space that is coronal to the interproximal contact between adjacent, contacting teeth in the same arch.

O. GUARD (BITE GUARD; MOUTH GUARD; NIGHT GUARD): A removable dental appliance usually constructed of plastic that covers a dental arch and designed to minimize the damaging effects of bruxism and other occlusal habits.

O. INTERFERENCE: Any contact that inhibits the remaining occluding surfaces from achieving stable and harmonious contacts.

O. PLANE (Plane of Occlusion): An imaginary plane, which is related anatomically to the cranium and which theoretically touches the incisal edges of the incisors and the tips of the occluding surfaces of the posterior teeth. It is not a plane in the true sense of the word, but represents the mean of the curvature of the surface.

O. PREMATURITY: Any contact of opposing teeth that occurs before the desirable intercuspation.

O. SURFACE: Pertaining to the masticatory surfaces of the posterior teeth.

O. TRAUMA: Injury resulting in tissue changes within the attachment apparatus as a result of occlusal force(s).

PRIMARY O.T.: Injury resulting in tissue changes from excessive occlusal forces applied to a tooth or teeth with normal support.

SECONDARY O.T.: Injury resulting in tissue changes from normal or excessive occlusal forces applied to a tooth or teeth with reduced support.

O. TRAUMATISM: Functional loading of teeth, usually off-axis, that is of sufficient magnitude to induce changes to the teeth (e.g., fractures, wear) or supporting structures. Changes may be temporary or permanent.

O. WEAR: Loss of substance on opposing occluding units or surfaces due to attrition or abrasion. *See:* Abrasion; Attrition; Facet.

OCCLUSION: Any contact of opposing teeth.

CENTRIC O. (Acquired Centric and Habitual Occlusion): The maximum intercuspation or contact of the teeth of the opposing arches.

ECCENTRIC O.: Any relation of the mandibular to the maxillary teeth other than centric occlusion.

PHYSIOLOGIC O.: Occlusion in harmony with the functions of the masticatory system.

PROTRUSIVE O.: Occlusion of teeth when the mandible is protruded from centric maximum intercuspation.

RETRUSIVE O.: A biting relationship in which the mandible is more distally placed than in maximum intercuspation.

TRAUMATIC O.: *See:* Occlusal Trauma.

ODONTALGIA: Toothache; pain in a tooth.

ODONTOBLAST: A connective tissue cell found in the odontoblastic layer of the dental pulp that is responsible for deposition of dentin.

ODONTOGENIC: 1. Tooth-forming. 2. Arising in tissues that give origin to the teeth.

ODONTOMA: A developmental anomaly consisting of a calcified mass of enamel, dentin, and cementum that may or may not resemble a tooth.

ODONTOPLASTY: The reshaping of a portion of a tooth.

OLIGODONTIA: The congenital absence of a large number of teeth.

ONCOGENE: A gene controlling cellular proliferation, altered through mutation or included in a viral genome, that can promote neoplastic transformation or normal cells.

OPEN BITE: A condition in which certain teeth cannot be brought into the occlusal contact with their antagonists.

OPERCULITIS: *See:* Pericoronitis.

OPERCULUM: The flap of mucosa over a partially erupted tooth.

OPPORTUNISTIC INFECTION: An infection usually initiated by endogenous, normally non-pathogenic, flora that occurs in a host whose resistance is lowered (e.g., by other diseases or by drugs).

OPSONIN: A substance (e.g., antibody, complement) capable of enhancing phagocytosis.

ORAL HYGIENE (O. Physiotherapy, Plaque Control): Removal of bacterial plaque with brushes, dental floss, and other devices. The maintenance of oral cleanliness.

ORAL PROPHYLAXIS: *See:* Prophylaxis, Oral.

ORAL SEPSIS: A disease condition in the mouth or adjacent structures that may have systemic effects through the dissemination of infection and toxins.

ORGANIZATION: The replacement of blood clots by fibrous tissue in a healing wound

ORIFICE: Any opening, whether by a foramen, a meatus, a perforation, or one which serves as an entrance or outlet to a vessel, canal, or cavity.

OROANTRAL FISTULA: *See:* Fistula, Oroantral.

ORTHODONTIC RETAINER: Any type of device used for the fixation or stabilization of teeth after orthodontic movement.

ORTHOPANTOGRAPH: A panoramic radiograph that includes images of the maxilla and mandible on a single extraoral film.

OSSEOINTEGRATION: *See:* Integration.

OSSEOUS: Bony; pertaining to bone.

OSSEOUS COAGULUM: A mixture of small bone particles and blood used as a bone graft.

OSSEOUS SURGERY: *See:* Surgery, Osseous

OSSIFICATION: To change into bone.

OSTECTOMY (Osteotomy): The excision of a bone or portion of a bone. In periodontics, ostectomy is done to correct or reduce deformities caused by periodontitis in the marginal and interalveolar bone and includes the removal of bone that is attached to the tooth.

OSTEITIS: Inflammation of bone involving the Haversian spaces, canals, and their branches.

CONDENSING (Formative, Sclerosing) O.: Osteitis associated with increased bone density.

O. DEFORMANS (Paget's Disease): A bone disease of unknown cause, characterized by enlargement of the cranial bones and often the maxilla or mandible. Radiographically there may be a cotton-wool appearance.

OSTEOBLAST: A fully differentiated cell, arising from mesenchymal progenitors, that is responsible for the production of bone matrix and the resorptive remodeling of bone.

OSTEOCLAST: A large, multinucleated cell, arising from mononuclear precursors of the hematopoietic lineage, that is associated with bone resorption.

OSTEOCYTE: An osteoblast that has become embedded within the bone matrix.

OSTEOGENESIS: Development of bone; formation of bone.

OSTEOGENIC: Any tissue or substance with the potential to induce growth or repair of bone.

OSTEOID: The organic matrix of bone; developing bone that has not undergone calcification.

OSTEOMYELITIS: Inflammation of bone marrow and adjacent bone.

OSTEOPERIOSTEAL: Pertaining to bone and its periosteum.

OSTEOPLASTY: Reshaping of the alveolar process to achieve a more physiologic form without removal of alveolar bone proper.

OSTEOPOROSIS: Abnormal rarefaction of bone, seen most commonly in the elderly.

OSTEORADIONECROSIS: Necrosis of bone following irradiation.

OSTEOSCLEROSIS: *See:* Osteitis, Condensing.

OVERBITE: Vertical overlapping of the mandibular incisors by the maxillary incisors when the jaws are in centric (habitual) occlusion.

OVERCLOSURE: Decreased occlusal vertical dimension.

OVERDENTURE: *See:* Denture.

OVERGROWTH: Excessive enlargement of a part due to an increase in size of the constituent cells (hypertrophy) or an increase in their number (hyperplasia).

OVERHANG: Excess of dental restorative material extending beyond cavity margins.

OVERJET: The horizontal projection of the maxillary incisors beyond the mandibular incisors when the jaws are in centric (habitual) occlusion.

P

PACK (archaic): *See:* Periodontal Dressing.

PALLIATE: To mitigate, soothe, relieve, reduce in violence.

PANCYTOPENIA: Pronounced reduction in the number of cells and platelets in the circulating blood.

PANORAMIC RADIOGRAPH: *See:* Orthopantograph.

PAPILLA: Any small, nipple-shaped elevation.

CIRCUMVALLATE P.: One of eight or 10 projections from the dorsum of the tongue forming a V-shaped row anterior to and parallel with the sulcus terminalis. Each papilla is surrounded by a circular trench having a slightly raised outer wall. On the sides of the papilla and on the opposed margins of the vellum are numerous taste buds.

FILIFORM P.: Elongated conical projections covering the dorsum of the tongue.

FOLIATE P.: Numerous parallel projections arranged in transverse folds on the posterolateral margins of the tongue.

FUNGIFORM P.: Numerous, minute, mushroom shaped elevations on the dorsum of the tongue.

GINGIVAL P., INTERDENTAL P.: *See:* Gingival Papilla.

INCISIVE P.: The elevation of soft tissue covering the foramen of the incisive or nasopalatine canal.

PAPILLECTOMY: Surgical removal of a gingival papilla.

PAPILLOMA: A benign, exophytic, pedunculated, cauliflower-like neoplasm of epithelium. May have a viral etiology.

PAPILLON-LEFÈVRE SYNDROME: Palmar-plantar hyperorthokeratosis with precocious periodontal destruction in the primary and permanent dentition. Thought to be the result of homozygosity of autosomal recessive genes.

PAPULE: A small, circumscribed, solid elevation of the skin.

PARAFUNCTION: Abnormal function, as in bruxism.

PARAKERATOSIS: *See:* Hyperparakeratosis.

PARETHESIA: An abnormal sensation, such as burning, prickling, or numbness. Usually caused by nerve injury and sometimes follows surgical procedures.

PAROXYSM: A sharp spasm or convulsion.

PAROXYSMAL TRIGEMINAL NEURALGIA

(Tic Douloureux): A severe paroxysm of pain occurring, usually unilaterally, in the distribution of the trigeminal nerve (especially the second and third divisions). Seen in middle-aged to elderly adults. The pain may be precipitated by a slight stimulus in a "trigger area."

PARTIAL THICKNESS FLAP: *See:* Flap, Partial Thickness.

PARULIS: The gingival drainage tract associated with an oral abscess of odontogenic origin. A gum boil.

PASSIVITY: In reference to dental implants, the property of the oxidized layer on the surface of the metal that does not break down under physiological conditions.

PATHOGEN: Any disease-producing microorganism.

PATHOGENESIS: The origin and development of disease.

PATHOGNOMONIC: Characteristic or symptomatic of a disease. A sign or symptom on which a diagnosis can be made.

PATHOSIS: A disease entity; a morbid condition.

PEDICLE: A stem-like or narrow base part, such as the stalk by which a non-sessile tumor is attached.

PEGS, EPITHELIAL (Rete Ridges): Ridge-like projections of epithelium into the underlying stroma of connective tissue that normally occur in mucous membrane and dermal tissue subject to functional stimulation.

PELLICLE, SALIVARY: Tooth- or mucosal-adherent salivary proteins.

PEMPHIGOID (Cicatricial Pemphigoid, Benign Mucous Membrane Pemphigoid): A chronic vesiculobullous autoimmune disorder that primarily affects the mucosa in older females; characterized by a sub-basilar separation of epithelium from connective tissue; almost all cases have an oral involvement with the gingiva being the most favored site.

PEMPHIGUS: Refers to a group of autoimmune bullous diseases (pemphigus vulgaris, pemphigus vegetans, and pemphigus erythematosus) that affects skin and mucous membranes primarily between the fourth and sixth decades of life; characterized by acantholysis and intraepithelial blistering; untreated, the mortality rate for these diseases ranges from 70% to 100%.

PENICILLIN: A generic name for a related group of antibiotics differing in antibacterial spectrum, oral absorption, and resistance to beta-lactamase enzymes. Classified as penicillin G and congeners (penicillin V), anti-staphylococcal penicillins (methicillin, dicloxacillin), extended spectrum penicillins (ampicillin and amoxicillin), and extended-spectrum penicillins with beta-lactamase inhibitors (amoxicillin and clavulanate, ampicillin and sulbactam).

PENICILLIN-BINDING PROTEINS (PBPs): Receptor sites (commonly transpeptidase enzymes) for penicillin in its inhibition of bacterial cell wall synthesis; alterations in or formation of new PBPs are major mechanisms of resistance to penicillins. Also known as penicillin-sensitive enzymes (PSEs).

PEPTIDOGLYCAN: Major structural component of bacterial cell walls. Thicker in Gram-positive than in

Gram-negative bacteria. Synthesis is inhibited by the beta-lactam antibiotics.

PEPTOCOCCUS SSP.: Gram-positive, non-motile, anaerobic cocci occurring in irregular groups or clusters. Frequently found as a part of the subgingival plaque flora and occasionally implicated in oral infections and periodontal diseases.

PEPTOSTREPTOCOCCUS SSP.: Gram-positive, non-motile, anaerobic cocci occurring in chains. Frequently found as part of the subgingival flora and occasionally implicated in oral infections.

PERCUSSION: The act of striking a part with short, sharp blows as an aid in diagnosing conditions of the underlying parts (hypermobile tooth, ankylosed tooth, or status of an implant) by the sound obtained. Useful in locating a tooth with an inflamed periodontal ligament through the pain response.

PERIADENITIS MUCOSA NECROTICA RECURRENS: *See:* Aphae, Major.

PERIAPICAL: Relating to tissues surrounding the apex of a tooth, including the periodontal ligament and alveolar bone.

PERICORONITIS: Acute inflammation of the gingiva and/or mucosa surrounding a partially erupted tooth.

PERI-IMPLANTITIS: Inflammation around a dental implant and/or its abutment.

PERIODONTAL: Situated or occurring around a tooth; pertaining to the periodontium.

P. ABSCESS: *See:* Abscess, Periodontal

P. BONY DEFECTS: Alterations in the morphological features of the bone. Osseous defects may be subcategorized as follows:

CIRCUMFERENTIAL D: A vertical defect that includes more than one surface of a tooth, e.g., a vertical defect that includes the mesial and lingual surfaces of a tooth.

CRATER: A cup- or bowl-shaped defect in the interalveolar bone with bone loss nearly equal on the contiguous roots. The facial and lingual/palatal walls may be of unequal height. A type of intrabony defect, a crater also may be classified by the number of bony walls (i.e., a one-, two-, or three-walled); combination defects also exist.

FUNNEL-SHAPED D: An intrabony resorptive lesion involving one or more surfaces of supporting bone; may appear moat-like.

FURCATION INVASION: Pathologic resorption of bone within a furcation.

CLASSIFICATION OF FURCATION

INVASIONS:

CLASS I: Incipient loss of bone limited to the furcation flute that does not extend horizontally.

CLASS II: A variable degree of bone loss in a furcation, but not extending completely through the furcation.

CLASS III: Bone loss extending completely through the furcation.

HEMISEPTAL D: A vertical defect in the presence of adjacent roots; thus half of a septum remains on one tooth.

INTRABONY D. (Infrabony D): A periodontal defect surrounded by two or three bony walls or a combination of these.

P. DISEASE: Those pathologic processes affecting the periodontium; most often gingivitis and periodontitis. *See:* Periodontitis.

P. DRESSING (Pack): A protective material applied over the wound created by periodontal surgical procedures.

P. LIGAMENT: The connective tissue that surrounds and attaches roots of teeth to the alveolar bone.

P. MAINTENANCE (formerly referred to as Supportive Periodontal Therapy [SPT], Preventive Maintenance, Recall Maintenance): Procedures performed at selected intervals to assist the periodontal patient in maintaining oral health. As part of periodontal therapy, an interval is established for periodic ongoing care. Maintenance procedures are under the supervision of the dentist and typically include an update of the medical and dental histories, radiographic review, extraoral and intraoral soft tissue examination, dental examination, periodontal evaluation, removal of the bacterial flora from crevicular and pocket areas, scaling and root planing where indicated, polishing of the teeth, and a review of the patient's plaque control efficacy. Periodontal maintenance procedures following active therapy is not synonymous with a prophylaxis.

P. MEMBRANE (Archaic): The periodontal ligament.

P. POCKET: A pathologic fissure between a tooth and the crevicular epithelium, and limited at its apex by the junctional epithelium. It is an abnormal apical extension of the gingival crevice caused by migration

of the junctional epithelium along the root as the periodontal ligament is detached by a disease process.

INTRABONY POCKET: A periodontal pocket that extends into an intrabony periodontal defect. *See:* Periodontal Bony Defects.

PSEUDOPOCKET: A deepening of the gingival crevice resulting primarily from an increase in bulk of the gingiva without apical migration of the junctional epithelium or appreciable destruction of the underlying tissue. *See:* Gingival Pocket.

SUPRABONY POCKET: A periodontal pocket with a base coronal to the alveolar bone.

P. SPACE: The space between the tooth root and alveolar bone containing the periodontal ligament.

P. SYNDROME: A singular term that encompasses the characteristic clinical signs and symptoms of periodontal diseases such as inflammation, attachment loss, tooth mobility, etc.

P. TRAUMATISM: *See:* Occlusal Traumatism.

PERIODONTALGIA: Pain arising in the periodontal structures.

PERIODONTICS: That specialty of dentistry which encompasses the prevention, diagnosis, and treatment of diseases of the supporting and surrounding tissues of the teeth or their substitutes; the maintenance of the health, function and esthetics of these structures and tissues; and the replacement of lost teeth and supporting structures by grafting or implantation of natural and synthetic devices and materials.

PERIODONTIST: A dental practitioner who, by virtue of special knowledge and training in the field, is qualified to and limits his/her practice or activities to periodontics.

PERIODONTITIS: Inflammation of the supporting tissues of the teeth. Usually a progressively destructive change leading to loss of bone and periodontal ligament. An extension of inflammation from gingiva into the adjacent bone and ligament.

ADULT P.: A formerly used term. In general, patients formerly classified as having "adult periodontitis" are now included under the chronic periodontitis category.

AGGRESSIVE P.: A specific type of periodontitis with clearly identifiable clinical and laboratory findings, that make it sufficiently different from chronic periodontitis, to warrant a separate classification. Aggressive periodontitis occurs in a patient who

otherwise is clinical healthy (except for periodontal disease). Common features include rapid attachment loss and bone destruction, and familial aggregation. In addition, patients with aggressive periodontitis generally, but not universally, exhibit amounts of microbial deposits inconsistent with the severity of periodontal tissue destruction, phagocyte abnormalities, and elevated proportions of *A. actinomycetemcomitans* and, in some populations, *P. gingivalis*.

AGGRESSIVE P.: GENERALIZED FORM

(Formerly Generalized Juvenile Periodontitis):

In addition to the common features described above, A. P. usually affects persons under 30 years of age, but may be older. Typically, there is generalized interproximal attachment loss affecting at least three teeth other than first molars and incisors, and there is a pronounced episodic nature of the destruction of attachment and alveolar bone. There also may be a poor serum antibody response to infecting agents.

AGGRESSIVE P.: LOCALIZED FORM

(Formerly Localized Juvenile Periodontitis): In addition to the common features described above, typically there is circumpubertal onset, localized first molar/incisor presentation with interproximal attachment loss associated with at least two permanent teeth (one of which is a first molar) and involving no more than two teeth other than first molars and incisors. There usually is a robust serum antibody response to infecting agents.

CHRONIC P.: An infectious disease resulting in inflammation within the supporting tissues of the teeth, progressive attachment and bone loss and is characterized by pocket formation and/or recession of the gingiva. It is recognized as the most frequently occurring form of periodontitis. It is prevalent in adults, but can occur at any age. The disease is usually associated with the presence of plaque and calculus. Progression of attachment loss usually occurs slowly, but periods of rapid progression can occur. Associated with a variable microbial pattern.

EARLY-ONSET P.: A formerly used term. *See:* Aggressive Periodontitis.

JUVENILE P.: A formerly used term. *See:* Aggressive Periodontitis.

NECROTIZING ULCERATIVE P.: An infection characterized by necrosis of gingival tissues, periodontal ligament, and alveolar bone. These lesions are most commonly observed in individuals with

systemic conditions including, but not limited to, HIV infection, malnutrition, and immunosuppression. *See also:* Gingivitis, Necrotizing Ulcerative.

PREPUBERTAL P.: A formerly used term to designate the prepubescent occurrence of periodontitis.

Patients previously classified as having prepubertal periodontitis are now included under either the chronic periodontitis category or the periodontitis associated with systemic diseases category.

P. ASSOCIATED WITH SYSTEMIC DISEASE:

Periodontitis, often with onset at a young age, associated with one of several systemic diseases.

RAPIDLY PROGRESSIVE P.: A formerly used term.

Patients formerly classified as having rapidly progressive periodontitis are now included under either the chronic periodontitis category or aggressive periodontitis category.

RECURRENT P.: A condition where periodontitis has been successfully treated but then recurs. A secondary descriptor used with various categories of periodontitis (e.g., recurrent chronic periodontitis, recurrent aggressive periodontitis, etc).

REFRACTORY P.: A condition where one or more forms of periodontitis are unresponsive to treatment despite excellent patient compliance and delivery of periodontal therapy that ordinarily is successful in arresting the progression of periodontitis. A secondary descriptor used with various categories of periodontitis (e.g., refractory chronic periodontitis, refractory aggressive periodontitis, etc.).

PERIODONTIUM: The tissues that invest and support the teeth including the gingiva, alveolar mucosa, cementum, periodontal ligament, and alveolar and supporting bone.

PERIODONTOLOGY: The scientific study of the periodontium in health and disease.

PERIODONTOMETRY: The measurement of tooth mobility.

PERIODONTOPATHIC: Refers to agents able to induce and/or initiate periodontal pathoses.

PERIOSTEITIS: Inflammation of the periosteum.

PERIOSTEUM: A specialized connective tissue covering bones and possessing bone-resorptive and bone-forming potential.

PERIRADICULAR: Around or surrounding a tooth root.

PERLECHE: Cracking of the labial commissures. Angular cheilitis.

PETECHIAE: Hemorrhagic spots of pinpoint to pinhead size in the skin or mucous membrane.

PHAGOCYTE: Inflammatory cells of the mononuclear phagocyte lineage.

PHAGOCYTOSIS: The process of cellular ingestion and digestion of solid or semi-solid substances, such as other cells, bacteria, bits of necrosed tissue, and foreign particles.

PHARMACODYNAMICS: The biochemical and physiologic actions of drugs in the body as well as the mechanism of action of drugs.

PHARMACOKINETICS: Involved with the absorption, distribution, metabolism, and excretion of drugs.

PHARMACOLOGY: The study of the interaction of chemicals with biological systems.

PHASE CONTRAST MICROSCOPY: A method of microscopy that takes advantage of varying intensities of light waves passing through transparent objects, thus providing better differentiation of internal structures.

PHENOTYPE: The physical expression of an individual's genotype.

PHENYTOIN (Diphenylhydantoin): An anticonvulsant drug used in the control of epilepsy and other disorders. Often associated with gingival overgrowth.

PHYSICAL INJURY: May result from inappropriate oral hygiene procedures, inadequate dental restorations, poorly designed dental appliances, orthodontic bands and devices, and iatrogenic dentistry. May be accidental or deliberate.

PHYSIOLOGIC ARCHITECTURE: *See:* Architecture.

PHYSIOLOGY: The scientific study of the functions of living organs and parts and the ways in which they are affected by chemical and physical laws.

PIGMENTATION: The deposition of coloring matter; coloration or discoloration of a part by a pigment.

PLACEBO: An inactive substance resembling one having therapeutic value; used in controlled studies to determine the effect of drugs without the influence of bias.

PLAQUE: An organized mass, consisting mainly of microorganisms, that adheres to teeth, prostheses, and

oral surfaces and is found in the gingival crevice and periodontal pockets. Other components include an organic, polysaccharide-protein matrix consisting of bacterial by-products such as enzymes, food debris, desquamated cells, and inorganic components such as calcium and phosphate.

PLASMA CELL: An antibody producing B-lymphocyte that has reached the end of its differentiation pathway.

PLASMID: An extrachromosomal structure found in bacterial cells that carries genes necessary for cell-aided replication of itself along with genes that, if expressed, may change the characteristics of host cells; e.g., antibiotic resistance.

PLATELET-DERIVED GROWTH FACTOR (PDGF): A glycoprotein carried in the granules of platelets and released during blood clotting; a potent growth factor for cells of mesenchymal origin, including fibroblasts and smooth muscle cells.

PLEOMORPHISM: The assumption of various distinct forms or shapes by a single organism or species.

PLEXUS: A network; especially of nerves, lymphatics, or veins.

POCKET: *See:* Periodontal Pocket.

POLYCYTHEMIA: An abnormal increase in the proportion of red cells in the blood.

POLYMORPHISM: Occurring in several forms or having several morphological types.

POLYMORPHONUCLEAR LEUKOCYTE (PMN): *See:* Neutrophil.

POLYOSTOTIC: Pertaining to or affecting many bones.

POLYP: A pedunculated tumor arising in a mucous membrane.

PORPHYROMONAS: Formerly called *Bacteroides* SSP. *See:* *Prevotella*; *Porphyromonas gingivalis*.

PORPHYROMONAS GINGIVALIS: Formerly called *Bacteroides gingivalis*. Gram-negative, nonmotile, anaerobic, non-spore forming bacillus that occurs primarily in the oral cavity and is associated with some forms of severe periodontitis. It is a non-fermentative, pigmented *Porphyromonas* isolated principally from the gingival sulcus.

POSITIVE ARCHITECTURE: *See:* Architecture.

POSITIVE PREDICTIVE VALUE: The proportion of positive responses to a diagnostic test for disease that are accurate indicators of the true presence of the malady in a population. Expressed arithmetically as a proportion which is calculated as the number of true positive responses divided by the sum of true positive responses plus false positive responses, i.e., Positive predictive value = $TP/(TP+FP)$.

POSTURAL POSITION: *See:* Rest Position, Physiologic.

PREGNANCY TUMOR: *See:* Granuloma, Pyogenic.

PREMATURE CONTACT: *See:* Deflective Occlusal Contact.

PREMEDICATION: Medication given prior to an anesthetic or operation.

PREVENTIVE: Serving to avert the occurrence of.

PREVOTELLA: Formerly called *Bacteroides SSP*.
See: Porphyromonas.

PREVOTELLA INTERMEDIA: Formerly called *Bacteroides intermedius*. Gram-negative, non-motile, anaerobic, non-spore forming bacillus isolated from oral and other body sites. A common inhabitant of the gingival crevice, it has been associated with infections of the head, neck, and pleura. There are two distinct DNA homology groups designated as *P. intermedia* I and II.

PREVOTELLA MELANINOGENICA: Formerly called *Bacteroides melaninogenicus*. Gram-negative, non-motile, anaerobic, rod-shaped bacteria.

PROBE: A slender instrument with a blunt end suitable for use in exploring a channel, wound, sinus, pocket, etc.

PERIODONTAL P.: A calibrated probe used to measure the depth and determine the configuration of a periodontal pocket.

PROBING DEPTH: The distance from the soft tissue (gingiva or alveolar mucosa) margin to the tip of the periodontal probe during usual periodontal diagnostic probing. The health of the attachment apparatus can affect the measurement.

CLINICAL ATTACHMENT LEVEL P.: The distance from the cemento-enamel junction to the tip of the periodontal probe during usual periodontal diagnostic probing. The health of the attachment apparatus can affect the measurement.

RELATIVE ATTACHMENT LEVEL: The distance from a fixed reference point on a tooth or stent to the tip of the periodontal probe during usual periodontal diagnostic probing. The health of the attachment apparatus can affect the measurement.

PROCESS: Any marked prominence, outgrowth, or extension of the tissues of an animal or plant.

ALVEOLAR P.: The compact and cancellous bony structure that surrounds and supports the teeth.

PRODROME: A premonitory symptom of a disease; a forerunner of disease; a symptom indicating the onset of a disease.

PROGENITOR CELL: An undifferentiated cell that gives rise to one or more types of more specialized cells.

PROGESTERONE: A generic term for naturally occurring steroid hormones containing a pregnane nucleus; secreted from the corpus luteum and placenta; a luteohormone; implicated in hormonal and pubertal gingivitis.

PROGNATHIC: A forward relationship of the jaws, usually used with reference to the mandible.

PROGNOSIS: A prediction as to the progress, course, and outcome of a disease.

PROGRESSIVE SYSTEMIC SCLEROSIS

(Scleroderma): A chronic disorder of unknown cause characterized by progressive fibrosis of skin and multiple organs, and by vascular insufficiency. Oral structures become indurated and stiff; radiographically the periodontal ligament spaces may be thickened.

PROPHYLAXIS, ANTIBIOTIC: The administration of antibiotics to patients without evidence of infection to prevent microbial colonization and thus avoid or reduce subsequent postoperative complications.

PROPHYLAXIS, ORAL: The removal of plaque, calculus, and stains from the exposed and unexposed surfaces of the teeth by scaling and polishing as a preventive measure for the control of local irritational factors. *See:* Periodontal Maintenance.

PROPIONIBACTERIUM PROPIONICUS:

Formerly called *Arachnia propionica*. Gram-positive, non-motile, facultative, rod-shaped bacteria found in supra- and subgingival plaque.

PROPIONIBACTERIUM SSP.: Gram-positive, non-motile, anaerobic, rod-shaped bacteria primarily isolated from subgingival plaque.

PROPRIOCEPTOR: Sensory nerve terminals that give information concerning movement and position of the body and its parts.

PROSTAGLANDINS: A group of fatty acid compounds derived from arachidonic acid by the cyclooxygenase pathway that are potent regulators of a variety of biological processes; aspirin and ibuprofen are inhibitors of cyclooxygenase.

PROSTHESIS: An artificial part designed to replace a part of the human body.

DENTAL P.: An artificial replacement of a lost part of the natural dentition or oral cavity.

FIXED PARTIAL DENTURE: *See:* Denture.

REMOVABLE PARTIAL DENTURE: *See:* Denture.

TEMPORARY P.: A fixed or removable restoration designed to be replaced with a more permanent appliance.

PROSTHETICS: The art and science of supplying missing parts of the human body.

PROTEOGLYCANS: Extracellular and cell surface macromolecules (decorin, syndecan, etc.) composed of a protein core with sites for the attachment of one or more glycosaminoglycan chains; functions in cell adhesion, growth, and organization of the extracellular matrix.

PROTO-ONCOGENE: A gene in the normal human genome that appears to have a role in normal cellular physiology and is often involved in regulation of normal cell growth and proliferation. Products of proto-oncogenes may have important roles in normal cellular differentiation; as a result of somatic mutations, these genes may become oncogenic.

PROTRUSION: Indicating teeth or other maxillary and mandibular structures that are positioned anterior to the normal or to the generally accepted standard.

PROVISIONAL SPLINT: A device used to provide temporary stabilization of mobile teeth.

PROXIMAL: Nearest to the center. In dentistry, the surface of a tooth adjacent to another tooth.

PROXIMAL WEDGE: A periodontal surgical procedure for removal of excessive soft tissue mesial or distal to a tooth or teeth in an arch. *See:* Wedge Procedure, Distal Wedge.

PSEUDOMEMBRANE: A false membrane, such as is seen in necrotizing ulcerative periodontitis.

PSEUDOPOCKET: *See:* Periodontal Pocket, Pseudopocket.

PULPECTOMY: The complete removal of the dental pulp.

PULPITIS: Inflammation of the dental pulp.

PULPOTOMY: Surgical amputation of the coronal portion of the dental pulp.

PULP STONE (Nodule): *See:* Denticle.

PULP VITALITY TESTS: Electrical, thermal, and invasive (e.g., test cavity) procedures used to determine the status of the dental pulp.

PURPURA: Hemorrhage into the tissues with resultant changes in color varying from red to purple, fading to brownish-yellow, and then disappearing.

PURULENT: Accompanied by or containing pus.

PUS: A product of inflammation consisting of leukocytes, degenerated tissue elements, tissue fluids, and microorganisms.

PUSTULE: A small, circumscribed elevation on the skin containing pus.

PYOGENIC: A pus-producing substance or agent.

PYOGENIC GRANULOMA: *See:* Granuloma, Pyogenic.

PYORRHEA: An archaic term for several periodontal diseases.

Q

QUADRANT: One of the four sections into which the dental arches can be divided, as determined by an imaginary midline between the central incisors, dividing each dental arch into two halves.

QUINOLONES: A class of synthetic, broad spectrum antibacterial agents that exhibit bactericidal action.

R

RADICULAR: Pertaining to the root of a tooth and its adjacent structures.

RADIOLUCENT: Permitting the passage of roentgen rays or other forms of radiant energy; radiolucent areas appear dark on exposed film.

RADIOPAQUE: Not penetrable by roentgen rays or other form of radiant energy; radiopaque areas appear light or white on the exposed negative film.

RANULA: *See:* Cyst, Retention.

REATTACHMENT: To attach again. The reunion of epithelial and connective tissue with a root surface. Not to be confused with new attachment.

RECALL MAINTENANCE: *See:* Periodontal Maintenance.

RECESSION: Location of marginal periodontal tissues apical to the cemento-enamel junction.

GINGIVAL R.: Location of the gingival margin apical to the cemento-enamel junction.

SURGICAL R.: Location of the marginal tissues apical to the cemento-enamel junction as a result of periodontal surgery.

RECIPIENT SITE: The site into which a graft or transplant material is placed.

RECOMBINANT DNA: Deoxyribonucleic acid that has been modified by deletion or addition of genetic information.

RECORD: *See:* Clinical Record.

RECURRENCE: Reappearance or return, as of inflammation, or disease that has been successfully treated.

RE-ENTRY: To reopen a site that has undergone periodontal surgery to improve, observe, or enhance results obtained from the initial operation.

REFERRED SYMPTOMS: Symptoms perceived in tissues distant to and unrelated to the true diseased site.

REFLECTION: The elevation and folding back of all, or part, of the soft tissue to expose the underlying structures. *See:* Surgery, Periodontal.

REFRACTORY: Persistent; patients or sites that continue to demonstrate disease after appropriate therapy.

REGENERATION: Reproduction or reconstitution of a lost or injured part.

GUIDED TISSUE (Bone) R.: Procedures attempting to regenerate lost periodontal structures through differential tissue responses. Guided bone regeneration typically refers to ridge augmentation or bone regenerative procedures; guided tissue

regeneration typically refers to regeneration of periodontal attachment. Barrier techniques, using materials such as expanded polytetrafluoroethylene, polyglactin, polylactic acid, calcium sulfate and collagen, are employed in the hope of excluding epithelium and the gingival corium from the root or existing bone surface in the belief that they interfere with regeneration.

PERIODONTAL R.: Restoration of lost periodontium.

REGISTRATION (Bite): A record of jaw relationships used in the mounting of casts on an articulator.

REITER'S SYNDROME: A condition of unknown cause, usually seen in young men, characterized by urethritis, arthritis, conjunctivitis, and mucocutaneous lesions.

REJECTION: An immunological response to incompatibility in a transplanted organ.

ATTACHMENT LEVEL, RELATIVE: *See:* Relative Attachment Level.

RELEASING INCISION: *See:* Incision.

REMISSION: A diminution or abatement of the signs and/or symptoms of a disease; also the period during which such diminution occurs.

REMOVABLE APPLIANCE: A dental prosthesis that attaches to the teeth and can be removed by the patient.

ORTHODONTIC R. A.: An appliances that affect tooth movement.

PROSTHETIC R. A.: A Prosthesis that take the place or perform the function of the missing tooth or teeth.

REPAIR: Healing of a wound by tissue that does not fully restore the architecture or the function of the part.

REPLANTATION, TOOTH: The replacement of a totally luxated (accidentally or intentionally) tooth into its socket.

RESECTION: Excision of some portion of a structure such as bone, gingiva, or a tooth root.

RESIDUAL RIDGE: That portion of the dental ridge and its soft tissue covering that remains following the removal of teeth.

RESISTANCE: Inherent ability of an individual or an organism to protect against the damaging effects of physical, chemical, or microbiologic agents.

RESOLUTION: The subsidence of a pathologic state.

RESORPTION: A loss of substance from tissues that normally are calcified, such as the dentin or cementum of teeth, or of the alveolar process. The condition may be physiologic or pathologic.

BONE R.: Bone loss due to osteoclastic activity.

CAVERNOUS R.: Bone loss leaving hollow spaces.

EXTERNAL R.: Resorption of tooth structure beginning on the external surface.

IDIOPATHIC R.: Loss of calcified tissues without apparent cause.

INTERNAL R.: Tooth resorption beginning from within the pulp.

REST POSITION, PHYSIOLOGIC: The postural position of the mandible when an individual is resting comfortably in an upright position and the associated muscles are in a state of minimal contractual activity.

RETENTION: The maintenance and stabilization of the teeth in the position into which they were moved; holding in the proper position of a removable prosthesis.

RETE RIDGES: *See:* Pegs, Epithelial.

RETRACTOR: An instrument designed for use in retracting the soft tissues during an operation.

RETROFILLING: A method of sealing the root canal of a tooth by an apical approach.

RETROGNATHISM: A condition of facial disharmony in which one or both jaws are posterior to normal in their craniofacial relationships; usually used in reference to the mandible.

RETROMOLAR PAD: The soft tissue located behind the terminal mandibular molar.

RETRUDED POSITION: *See:* Centric Relation.

REVERSE ARCHITECTURE: *See:* Architecture.

RIBONUCLEIC ACID (RNA): Polymer composed of ribonucleotides; three types of RNA function in translation of information from genes (DNA) to proteins. In some viruses, RNA is also the genetic material.

MESSANGER RNA (mRNA): A transcript of the coding region of a gene.

RIBOSOMAL RNA (rRNA): Combines with ribosomal proteins to form the peptide assembly structures in the cell.

TRANSFER RNA (tRNA): Binds and delivers an amino acid to the ribosome according to the order specified in the mRNA for synthesis of proteins.

RIDGE AUGMENTATION: *See:* Augmentation, Edentulous Ridge.

ROOT: 1. The anatomic portion of the tooth usually covered with cementum. 2. The anatomic part of a tooth normally within the alveolar bone and attached to it by the periodontal ligament.

R. AMPUTATION: The removal of part or all of a root from a tooth.

R. CANAL: The space within the root of a tooth containing connective tissue, nerves, and blood vessels, and connecting the pulp chamber with the apex of the root.

R. CANAL THERAPY (Endodontic Therapy):

Treatment of a tooth, usually performed by completely removing the pulp, disinfecting the pulp chamber and root canal, and filling these spaces with inert sealing material. Usually done in a tooth with an irreversibly damaged pulp.

R. CURETTAGE: *See:* Curettage, Root.

R. DENUATION: Exposure of a portion of a root as the result of recession.

R. FRAGMENT: A portion of the root, usually the root tip, retained in the jaws following the incomplete extraction, or incomplete resorption of the primary tooth.

R. FUSION: A union of merging of roots of multi-rooted teeth. If roots from adjacent teeth are fused, the condition is called concrescence.

R. HYPERSENSITIVITY: *See:* Dental Hypersensitivity.

R. PLANING: A treatment procedure designed to remove cementum or surface dentin that is rough, impregnated with calculus, or contaminated with toxins or microorganisms. *See:* Scaling.

R. PREPARATION: Use of instruments or chemicals on roots to eliminate irritants, prevent bacterial accumulation, and encourage wound healing.

R. PROXIMITY: Closeness of roots of adjacent teeth.

R. RESECTION: Surgical removal of all or a portion of a tooth root.

R. RESORPTION: Loss or blunting of some portion of a root, sometimes idiopathic, but also associated

with orthodontic tooth movement, inflammation, trauma, endocrine disorders, and neoplasia.

R. RETENTION: Preservation of an endodontically treated root in the alveolus when the coronal portion of the tooth has been removed or lost in order to maintain the integrity of the edentulous ridge.

R. SUBMERGENCE: A surgical procedure to cover a retained root with soft tissue.

ROTHIA DENTOCARIOS: Gram-positive, non-motile, anaerobic, rod-shaped bacteria frequently found in association with periodontal diseases.

RUGAE: The irregular ridges in the masticatory mucosa covering the anterior part of the hard palate.

S

SACCHAROLYTIC: The ability of some microorganisms to catabolize carbohydrates (generally sugars).

SAGITTAL PLANE: The anteroposterior plane or section parallel to the long axis of the body.

SALIVA: The secretions of the major and minor salivary glands.

SALIVARY CALCULUS: *See:* Calculus, Dental.

SCALER: An instrument for removing calculus or other deposits from the surfaces of teeth.

SONIC S.: An instrument vibrating in the sonic range (approximately 6,000 cps) that, accompanied by a stream of water, can be used to remove adherent deposits from teeth.

ULTRASONIC S.: An instrument vibrating in the ultrasonic range (approximately 25,000 to 30,000 cps) which, accompanied by a stream of water, can be used to remove adherent deposits from teeth.

SCALING: Instrumentation of the crown and root surfaces of the teeth to remove plaque, calculus, and stains from these surfaces. *See:* Root Planing.

SCALLOPED: A curved design of an incision or border.

SCAR: Fibrous tissue replacing normal tissues destroyed by injury or disease.

SCLERODERMA: *See:* Progressive Systemic Sclerosis.

SCLEROSIS: An induration or hardening, usually of chronic inflammatory origin, produced by hyperplasia of the interstitial fibrous connective tissue. In the jaws it is characterized by an increased calcification as in condensing osteitis.

SCURVY: Malnutrition caused by a dietary deficiency of vitamin C. Oral manifestations may include ulcerations, mucosal hemorrhage, and gingival enlargement.

SEBACEOUS: Relating to sebum; oily; fatty.

SECRETION: The formation and release of a product by glandular activity.

SEDATION, CONSCIOUS: A minimally depressed level of consciousness that retains the patient's ability to independently and continuously maintain an airway and respond appropriately to physical stimulation and verbal command; produced by pharmacologic or non-pharmacologic methods, or a combination thereof. The goal of conscious sedation is to render the patient free of fear, anxiety, and apprehension during a treatment procedure.

SEDATIVE: An agent, usually a drug, that produces physiologic changes to soothe, lessen irritability, and allay excitement and activity in the apprehensive patient.

SELECTIVE GRINDING: *See:* Grinding, Selective.

SELENOMONAS SPUTIGENA: Gram-positive, anaerobic, rod-shaped bacteria displaying "tumbling" motility. Primarily isolated from subgingival plaque.

SENSITIVITY: The ability of a diagnostic test to detect a disease, when present, in a diseased population. Sensitivity = True Positives divided by the sum of True Positives plus False Negatives, or $TP/(FN+TP)$. True Positives are correct positive diagnoses; False Negatives are incorrect negative diagnoses. Diagnostic screening tests are designed to have high sensitivity (usually at the expense of specificity) to minimize the number of diseased patients who go undetected. *See also:* Specificity.

SEPSIS: Presence in blood or tissues of pathogenic microorganisms or their products.

SEPTICEMIA: Systemic disease associated with the presence and persistence of pathogenic microorganisms or their toxins in the blood.

SEPTUM: A partition of hard or soft tissue.

INTERALVEOLAR S.: That portion of the alveolar process that lies between the roots of adjoining teeth.

INTERRADICULAR S.: That portion of the alveolar process that lies between the roots of multirrooted teeth.

SEQUESTRATION: The separation of necrotic bone from the surrounding healthy bone thus forming a sequestrum.

SEQUESTRUM: A mass of non-vital bone that has become separated from healthy bone.

SESSILE: Having a broad base of attachment; not pedunculated.

SEXTANT: One of the six relatively equal sections into which the dental arches can be divided. Anterior sextants contain the incisor teeth and canines; posterior sextants include the premolar and molar teeth.

SHELF, BUCCAL: Cortical bony surface of the mandible extending from the alveolar ridge to the external oblique line in the vestibular region.

SIALADENITIS: Inflammation of a salivary gland.

SIALAGOGUE: Any substance or agent that promotes the secretion and flow of saliva.

SIALOLITH: A salivary stone (calculus).

SIALORRHEA: Excessive flow of saliva.

SIGN: An objective indication of disease discoverable by the clinician upon evaluation of the patient. *See also:* Symptom.

SINUS: A cavity or hollow space in a bone or other tissue such as the dilated channels for venous blood in the cranium or liver.

MAXILLARY S.: *See:* Antrum.

S. TRACT: A fistula or tract leading to a suppurating cavity.

SLOUGH: Necrotic tissue in the process of separating from viable portions of the body.

SMEAR: A thin daub of blood, pus, or extraneous matter on a glass slide stained and mounted for study under the microscope.

SOCKET: A hollow or depression into which a corresponding part fits. *See:* Alveolus.

DRY S.: Localized osteitis of the alveolus following tooth extraction due to infection or loss of the blood clot.

SOFT TISSUE: Any non-calcified tissue. In periodontics, usually refers to the oral mucous membranes including the gingiva.

SONIC SCALER: *See:* Scaler, Sonic.

SOUNDING: Penetration of anesthetized soft tissue by a probe in order to determine the topography of the alveolar process.

SPASM: A sudden, involuntary, generally painful contraction of a muscle or groups of muscle fibers.

SPECIFICITY: The ability of a diagnostic test to detect the absence of a disease in a healthy population. Specificity = True Negatives divided by the sum of True Negatives plus False Positives, or $TN/(FN+TN)$. True Positives are correct positive diagnoses; False Negatives are incorrect negative diagnoses. Diagnostic tests with high specificity are often used to confirm the presence of a malady first suggested by a highly sensitive but less specific screening test. *See also:* Sensitivity.

SPECIMEN: A sample or part taken to determine the character of the whole for diagnostic purposes.

SPECTRUM, ANTIBACTERIAL: The range of antimicrobial activity of a drug.

SPICULE: A slender, pointed, needle-like body such as a spicule of bone.

SPIROCHETES: Helical (cork-screw), Gram-negative, highly motile bacteria, characterized by a flexible cell wall. They are markedly increased in number in periodontal pockets. The major genus in pockets in the *treponema* ssp.

SPLINT: Any apparatus, appliance, or device employed to prevent motion or displacement of fractured or movable parts.

DENTAL S.: An appliance designed to immobilize and stabilize loose teeth.

SPLINTING, OF ABUTMENTS: The joining of two or more teeth into a rigid unit.

SPLINTING, OF MUSCLES: Prolonged muscle spasms that inhibit or prevent movement of a joint or appendage.

SPORADIC: Single; scattered; not epidemic; occurring at isolated geographical and/or temporal loci, especially when referring to a disease.

STAPHYLOCOCCUS AUREUS: Gram-positive, non-motile, aerobic bacteria isolated from the gingival crevice and capable of producing suppurative lesions. Occur as cocci, clusters, pairs, or chains.

STAPHYLOCOCCUS EPIDERMIS: Spherical, non-motile, aerobic bacteria with Gram-positive cell walls. They are found in supragingival plaque. The majority of *S. epidermis* are catalase negative and cause infection in compromised hosts, particularly in cancer patients.

STASIS: The arrest or cessation of flow of any body fluid, especially blood.

STATIC: In a state of rest or equilibrium; not dynamic; pertaining to that which is stationary.

STATISTICS: A collection of numerical facts pertaining to a subject; the science that deals with collection, organization, and analysis of such facts.

STENOSIS: Narrowing or stricture of a duct, canal, or vessel.

STENT: 1. A device used in conjunction with a surgical procedure to immobilize hard or soft tissue and to protect a healing wound. 2. An acrylic appliance used as a positioning guide or support.

STERILITY: The absence of all forms of life.

STERILIZATION: A process whereby all microorganisms as well as other forms of life are killed.

STEROID HORMONES: A large family of biologically important hormones containing a tetracyclic (cyclopentanophenanthrene) nucleus.

STILLMAN'S CLEFT: An epithelial downgrowth leading to a splitting of the gingiva.

STIMULATOR, INTERDENTAL: A device designed for massage of interproximal soft tissues.

STIMULUS: An excitant that produces a functional or trophic reaction in a receptor or an irritable tissue.

STIPPLING: The pitted, orange-peel appearance frequently seen in attached gingiva.

STOMA: Any minute orifice or opening on a free surface.

STOMATITIS: Inflammation of the soft tissues of the oral cavity.

S. MEDICAMENTOSA: Eruptive lesions of the oral mucosa resulting from the ingestion of a systemic allergen, usually a medication.

S. VENENATA: Lesions caused by exposure to contact allergens.

STOMATOGNATHIC SYSTEM: The combination of all the structures of the mouth and jaws used in speech, respiration, mastication, and deglutition.

STREPTOCOCCUS INTERMEDIUS: Gram-positive, facultative cocci that have been associated with refractory periodontitis.

STREPTOCOCCUS MITIOR: Formerly called *S. viridans*. Gram-positive, non-motile, aerobic, spherical bacteria that form chains and are isolated from the human respiratory tract and from certain clinical conditions, including infective endocarditis.

STREPTOCOCCUS MITIS: Gram-positive, non-motile, aerobic cocci that tend to form chains and are found in dental plaque. It is difficult to define *S. mitis* as it does little physiologically and is antigenically heterogeneous. It is often defined by exclusion (i.e., if oral Streptococci are not *S. salivarius*, *S. sanguis*, or *S. mutans*, it is often *S. mitis*).

STREPTOCOCCUS ORALIS: Gram-positive, non-motile, facultative cocci that are found primarily in plaque of healthy individuals or in healthy sites in individuals with periodontal disease.

STREPTOCOCCUS SANGUIS II: Gram-positive, non-motile, aerobic cocci that form chains and are found in dental plaque. It is also isolated from blood cultures of patients with subacute bacterial endocarditis. *S. sanguis* is grouped into type I and II according to surface antigens. Type I serotype appears to adhere better to salivary pellicles than type II strains.

STREPTOCOCCUS SSP.: Gram-positive, non-motile, facultative bacteria that represent a major group of oral bacteria. Normal constituent of plaque, but also associated with streptococcal diseases elsewhere in the body.

STREPTOCOCCUS VIRIDANS: See: *Streptococcus Mitior*.

STRESS: 1. Force exerted by mechanical means. 2. In dentistry, the pressure on teeth due to masticatory muscle activity. 3. Reactions of a body to forces of a deleterious nature, infections, and various abnormal

states that tend to disturb its normal physiologic equilibrium (homeostasis). 4. Stimuli that, when impinging upon an individual, produce disequilibrium. Should these compensating reactions be inadequate or inappropriate, they may lead to disorders.

STROMA: The supporting tissue or extracellular matrix of an organ.

SUBACUTE: Denotes a phase of a disease between the acute and chronic stages.

SUBGINGIVAL CALCULUS: *See:* Calculus, Subgingival.

SUBLUXATION: An incomplete dislocation.

SUBSTANTIVITY: Duration of time a chemical is in contact with a particular substrate; protracted release of a chemical. Related to clearance of a chemical.

SUBTRACTION RADIOGRAPHY: A photographic or digital method of attenuating the image representing unchanged structures from the compared radiographic images of the same anatomic image, thereby making changes easier to detect.

DIGITAL S. R.: A radiographic image subtraction method in which the pre- and postprocedure radiographic images are subtracted from each other within the computer memory and the resulting subtracted image is displayed on the monitor.

PHOTOGRAPHIC S. R.: A radiographic image subtraction method in which a mask film (negative) is made from the preprocedure radiograph. When this mask film is superimposed and viewed over the postprocedure film, the resultant image is a subtraction image containing the structure (or contrast medium) that is the difference between the pre- and postprocedural radiographs.

SUCULAR FLUID: *See:* Gingival Fluid.

SUPERNUMERARY: In excess of the regular or normal number.

SUPPORTING CUSPS (Centric Holding Cusps):

Those cusps of teeth that contact the fossae of the opposing teeth to support centric occlusion. In the normal adult tooth arrangement, these are the palatal cusps of the maxillary posterior teeth, the facial cusps of the mandibular posterior teeth, and the incisal edges of the mandibular anterior teeth.

SUPPORTING STRUCTURES OF A TOOTH:

See: Periodontium.

SUPPORTIVE PERIODONTAL TREATMENT:

See Periodontal Maintenance.

SUPPURATION: The formation of pus.

SUPERERUPTION: The eruption of teeth beyond the normal occlusal plane.

SURFACE TRANSLOCATING BACTERIA

(STB): Gram-negative, motile, rod-shaped bacteria that have a gliding movement and are found in dental plaque. They include *Campylobacter rectus*, *Eikenella corrodens*, and *Capnocytophaga*.

SURFACTANT: An agent that acts on the surface to reduce interfacial surface tension between two liquids or between a liquid and a solid.

SURGERY: 1. That branch of medical science concerned with the treatment of diseases or injuries by means of manual or operative methods. 2. The procedures performed by a surgeon. 3. The performance or procedures of an operation.

IMPLANT S.: Procedures concerned with the placement, uncovering, and removal of implants and the repair or modification of associated hard or soft tissues.

MUCOGINGIVAL S.: Procedures designed to correct defects in the morphology, position, or enhance the dental gingival junction, since defects in the morphology of the gingival and alveolar mucosa can accelerate the course of periodontal disease, or interfere with the successful outcome of periodontal treatment.

OSSEOUS S.: Procedures to modify bone support altered by periodontal disease, either by reshaping the alveolar process to achieve physiologic form without the removal of alveolar supporting bone, or by the removal of some alveolar bone, thus changing the position of the crestal bone relative to the tooth root. *See:* Osteotomy; Osteoplasty.

PERIODONTAL S.: Any surgical procedure used to treat periodontitis or to modify the morphology of the periodontium.

RECONSTRUCTIVE S.: The use of surgical procedures to restore a body part to a more normal appearance or function.

RE-ENTRY S.: A second stage procedure accomplished to improve, enhance, or evaluate results obtained from the initial operation.

SURGICAL DRESSING: *See:* Periodontal Dressing.

SUTURE: 1. The fixed, fibrous union of two bones.
2. Material used in closing a surgical or traumatic wound with stitches. 3. The act or process of uniting a wound, either surgical or accidental, through suturing.

SYMPTOM: Any subjective evidence of a disease or a patient's condition as perceived by the patient. *See* SIGN.

SYNDROME: A group of signs and symptoms of disordered function related to one another by means of some anatomical, physiological or biochemical peculiarity. Does not include a precise cause of illness but provides a framework for investigation and management.

T

T-CELL: *See:* Lymphocyte.

TABLE, OCCLUSAL: The occlusal surface of the premolars and molars.

TARTAR: *See:* Calculus, Dental.

TAURODONTISM: A variation in tooth form affecting some or all of the primary and secondary molars, marked by elongation of the body of the tooth so that the pulp chambers are large apico-occlusally and the roots are reduced in size.

TELANGIECTASIA: Permanent dilation of pre-existing blood vessels, creating small focal red lesions usually in the skin or mucous membranes.

TEMPOROMANDIBULAR DISORDERS (TMD):

A collection of medical and dental conditions affecting the temporomandibular joint (TMJ) and/or muscles of mastication and other contiguous tissue components. Includes myofascial pain-dysfunction syndrome (MPD); meniscal displacement with or without reduction (internal derangement); degenerative joint disease (osteoarthritis); rheumatoid arthritis; and other disorders of systemic origin, facial growth disharmonies, traumatic injuries, and neoplasms.

INTERNAL DERANGEMENT: In reference to temporomandibular disorders, an abnormal relationship of the articular disk to the mandibular condyle, fossa and/or articular eminence.

MENISCAL DISPLACEMENT WITH

REDUCTION: The condition wherein the articular

disk is located anterior or antero-medial to the condylar head when the jaw is closed. When the jaw is open the disk assumes the normal relationship to the condylar head and articular eminence.

MENISCAL DISPLACEMENT WITHOUT

REDUCTION: The condition wherein the articular disk is always located anterior or antero-medial to the condylar head regardless of whether the jaw is open or closed.

TEMPOROMANDIBULAR JOINT (TMJ): The connecting sliding hinge mechanism between the mandible and the temporal bone.

TERATOGENESIS: The induction of malformation in the fetus, often by a drug (e.g., thalidomide).

TETRACYCLINES: A group of broad-spectrum antibiotics, either natural or semi-synthetic. They inhibit protein synthesis by their action on microbial ribosomes and have anti-metalloproteinase activity. All have similar toxic and pharmacologic properties, differing mainly in their absorption and suitability for various modes of administration. They are effective against both Gram-positive and Gram-negative bacteria, as well as rickettsiae, chlamydiae, and mycoplasmas. They deposit in all mineralizing tissues.

THERAPY: Treatment of disease.

ANTIBIOTIC T.: The treatment of disease by the local or systemic administration of antibiotics.

PERIODONTAL T.: Treatment of periodontal diseases aimed at arresting or reversing their progression.

THROMBOCYTHEMIA: An abnormal increase in the number of circulating platelets.

THROMBOCYTOPENIA: A decrease in the number of circulating platelets.

TIC: A spasm; involuntary contraction or twitching usually of the facial and shoulder muscles.

T. DOULOUREUX: *See:* Paroxysmal Trigeminal Neuralgia.

TISSUE: An aggregation of similarly specialized cells united in the performance of a particular function

TITANIUM: A uniquely biocompatible, non-toxic, bio-inert, metal commonly used for dental implants.

TITANIUM ALLOY: Alloys of 6% aluminum and 4% vanadium typically are utilized to increase the tensile and fatigue strength, as well as to resist

corrosion. These alloys also form a titanium oxide (TiO_2) surface layer that interfaces with the bone.

TITANIUM OXIDE: A surface layer, 10 to 100 angstroms thick, formed within a millisecond when a cut surface of pure metallic titanium is exposed to air. This layer has ceramic properties and is resistant to corrosion, effectively protecting the implant against chemical attack in biological fluids.

TOLERANCE: 1. The ability to endure or be less responsive to a stimulus over a period of continued exposure. 2. The power of resisting the action of a poison or of taking a drug continuously or in large doses without injurious effect. 3. Decreasing response to continued use of the same dose of a drug.

TOMOGRAPHY: A general term for a technique that provides a distinct image of any selected plane through the body, while the images of structures that lie above and below that plane are blurred. Also called "bodysection radiography."

TONGUE THRUST: The infantile pattern of the suckle-swallow movement in which the tongue is placed between the incisor teeth or alveolar ridges resulting sometimes in anterior open bite, deformation of the jaws, and abnormal function.

TONUS, MUSCLE: The slight continuous contraction of muscle that aids in the maintenance of posture and in the return of blood to the heart.

TOOTHBRUSH TRAUMA: Damage to the teeth and/or adjacent soft tissues as a result of aggressive toothbrushing.

TOOTH EXTRUSION: Overeruption.

TOPICAL: Restricted to a surface area.

TOPOGRAPHY: The description of an anatomical surface region.

TORUS: An elevation, a swelling, a bulging projection, a protuberance.

T. MANDIBULARIS: A bony exostosis on the lingual aspect of the mandible, generally in the premolar-molar region; commonly bilateral.

T. PALATINUS: A bony protuberance occurring at the midline of the hard palate.

TOXIN: A poison of animal, vegetable, or microbial origin.

TRABECULA: A general term for a supporting or anchoring strand of connective tissue, such as a strand extending from a capsule into the substance of the enclosed organ.

TRABECULAE OF BONE: Anastomosing bony spicules in cancellous bone forming a meshwork of intercommunicating spaces filled with connective tissue.

TRANQUILIZER: A drug with a calming, soothing effect.

TRANSDUCTION: The process by which genetic material (DNA) is transmitted from one bacterial cell to another via a bacterial virus (phage).

TRANSILLUMINATION: The passage of light through body tissues for the purpose of examination.

TRANSLATION: 1. Movement of the condyle-menisus complex of the temporomandibular joint over the articular eminence. 2. The movement of a tooth (bodily movement) through alveolar bone without change in inclination.

TRANSMUCOSAL: That portion of the oral implant system (e. g., the abutment) that passes through the mucosa.

TRANSPLANT: 1. To transfer tissue from one part to another. 2. The tissue or organ taken from a body for grafting into another portion of the body or into another individual.

TRANSSEPTAL FIBEROTOMY: *See:* Gingival Fiberotomy.

TRANSUDATE: Any fluid substance that has passed through a membrane or tissue surface; sometimes associated with inflammation.

TRANSVERSION: Displacement of a tooth from its proper numerical position in the jaw.

TRAUMA: A wound or injury whether physical or psychological.

OCCLUSAL T.: *See:* Occlusal Trauma.

TRAUMATISM: The physical or psychic state resulting from an injury or wound.

OCCLUSAL T.: *See:* Occlusal Traumatism.

TRAUMATOGENIC: Capable of producing a wound or injury.

TREATMENT PLAN: The course of therapy and re-assessments designed for a patient.

TRENCH MOUTH: *See:* Periodontitis, Necrotizing Ulcerative.

TREPHINE: A surgical instrument for removing a disk or cylinder of bone or other tissue.

TREPONEMA DENTICOLA: A long, thin, corkscrew-like, Gram-negative, anaerobic spirochete that has been implicated as a possible etiologic agent of chronic periodontitis. The characteristic motility and morphology of this organism may be discerned by darkfield microscopy.

TRIFURCATION: The area where a tooth divides into three distinct roots.

T. INVASION: The extension of periodontitis or pulpitis into a bifurcation area.

TRIGEMINAL: Relating to the fifth cranial (trigeminal) nerve.

TRISMUS: Inability to open the mouth due to spasm of the muscles of mastication.

TROCHE: A medicated tablet meant to be dissolved in the mouth.

TROUGH, GINGIVAL: *See:* Gingival Crevice.

TUBERCULE: A small nodule or eminence.

TUBEROSITY: A protuberance or elevation of a bone.

MAXILLARY T.: The most distal portion of the maxillary alveolar ridge.

T. REDUCTION: The surgical excision of fibrous or bony tissue of the maxillary tuberosity.

TUMEFACTION: A swelling; the state of being swollen or the act of swelling.

TUNNEL PREPARATION: A surgical procedure performed on a multirrooted tooth, usually a mandibular molar, resulting in a completely opened furcation to provide access for oral hygiene.

TURGID: Congested; swollen.

ULTRASTRUCTURE: Fine structure beyond the resolution power of the light microscope; e.g., may be visible or implied using electron microscopes or other technologies.

UNDULATE: Having an irregular, wavy border; said of a colony of microorganisms.

UPRIGHTING: The movement of an inclined tooth to a more vertical axial inclination.

URTICARIA: A vascular reaction of the skin marked by the transient appearance of smooth, slightly elevated wheals and attended by severe itching.

V

VARICELLA ZOSTER (Shingles, Herpes Zoster):

Caused by the herpesvirus (varicella zoster virus); a painful papular or vesicular eruption is seen usually unilaterally on the skin or oral mucosa following the path of the involved sensory nerve. The patient exhibits fever and malaise.

VASCULARIZATION: The process of becoming vascular; the natural or surgically induced development of vessels in a tissue.

VASOCONSTRICTION: Narrowing or decrease in the lumen size of a blood vessel, especially an arteriole.

VASOCONSTRICTOR: An agent that promotes decrease in blood vessel diameter. Used in dentistry to prolong anesthesia, and to reduce bleeding during surgical procedures.

VASODEPRESSOR: 1. Having the effect of lowering the blood pressure through reduction in peripheral resistance. 2. An agent that causes vasodepression.

VASODILATION: Dilation or increase in the lumen of a blood vessel, especially an arteriole.

VEILLONELLA SSP.: Gram-negative, non-motile, anaerobic cocci found in supra- and subgingival plaque.

VENIPUNCTURE: Puncture of a vein, as in an intravenous injection.

VERRUCA: An epidermal neoplasm caused by a papilloma virus; a wart.

VERTICAL DIMENSION: A vertical measurement of the face between any two arbitrarily selected points

U

ULCER, ULCERATION: A lesion on the surface of skin or mucosa characterized by absence of epithelium; usually with inflammation.

ULTRASONIC SCALER: *See:* Scaler, Ultrasonic.

that are conveniently located, one above and one below the mouth, usually in the midline.

OCCLUSAL V.D.: The vertical dimension of the face when the teeth are in contact in centric occlusion.

REST V.D.: The vertical dimension of the face with the mandible in postural position.

VESICLE: An elevation of the skin or mucous membrane containing a watery fluid and less than 5 mm in diameter. *See:* Bulla.

VESTIBULOPLASTY: The surgical modification of the gingiva-mucous membrane relationships including deepening of the vestibular trough, altering the position of the frenulum or muscle attachments, and widening of the zone of attached gingiva.

VINCENT'S ANGINA: Painful membranous ulceration of the oropharynx and throat usually associated with necrotizing ulcerative periodontitis.

VINCENT'S INFECTION: *See:* Periodontitis, Necrotizing Ulcerative.

VIRULENCE: The disease-producing power of a microorganism.

VIRUS: One of a group of minute (15 to 300 nanometers) infectious agents characterized by a lack of independent metabolism and by the ability to replicate only within living cells.

VITALITY TEST: *See:* Pulp Vitality Tests.

VITALOMETER: A device that measures the response of a tooth to an electric stimulus to aid in determining pulpal vitality.

W

WEAR FACET: *See:* Facet.

WEDGE PROCEDURE: A surgical procedure designed to reduce excessive soft tissue from an edentulous area such as the maxillary tuberosity. *See:* Distal Wedge.

WHEAL (Hive, Welt): An acute, circumscribed, transitory area of edema of the skin; an urticarial lesion.

WIDMAN FLAP PROCEDURE, MODIFIED:

See: Flap, Modified Widman.

WOLINELLA RECTA: *See:* *Campylobacter Rectus*.

WORKING SIDE CONTACTS: Contacts of teeth on the side of the articulation toward which the mandible has been moved.

WOUND: An injury to living tissue; a forcible interruption of the continuity of any tissue.

X

XERODERMA: Excessive dryness of the skin due to a slight increase of the horny layer and diminished cutaneous secretion.

XERORADIOGRAPHY: A dry photoelectric process for recording x-ray images using metal plates coated with a semiconductor, such as selenium.

XEROSTOMIA: Dryness of the mouth due to inadequate salivary secretion.

X-LINKAGE (Sex-Linkage): Inheritance of certain characteristics determined by genes located in the sex chromosomes.

Y

YEAST: A general term that includes single-celled, usually rounded fungi. Most reproduce by budding and some may transform into a mycelial (mold) stage. They may become pathogenic in the oral cavity, particularly in immunocompromised individuals.

Z

ZYMOGEN: An inactive precursor that is converted to active enzyme by the action of another substance. Proenzyme..