CLINICAL SNAPSHOT

Is Idiopathic Always Idiopathic? What the Teeth Can Tell Us

The initial findings: gingival hyperplasia

A 25-year-old woman presented to the periodontology clinic of the dental hospital because of generalized hyperplastic swelling of the gingiva. Her fasting blood sugar was normal (01/2013: 97 mg/dL), but her inflammatory parameters were elevated (01/2013: ESR 90 mm/hr, CRP 1.9 mg/dL, WBC 11.1/nL). Her body-mass index (BMI) was over 30. As there was no other evidence of systemic illness and her medication use was unknown, the initially presumed diagnosis was of idiopathic gingival hyperplasia associated with chronic periodontitis. Systematic non-surgical periodontal treatment

along with adjuvant antibiotics led to moderate improvement, but the hyperplasia did not resolve. Repeated laboratory testing one year later revealed an elevated fasting blood sugar (03/2014: 204 mg/dL) and an HbA_{1c} value of 9.5%. Antidiabetic treatment and continued local mechanical treatment led to the near-total resolution of gingival hyperplasia.

We conclude from this case that patients who present with gingival hyperplasia should undergo intensified diagnostic testing for diabetes mellitus even if their initial fasting blood sugar is normal.

Prof. Dr. med. dent. Anton Friedmann, Dr. med. dent. Matthias Becker, Department Zahn-, Mund-, Kieferheilkunde, Universität Witten/Herdecke, Lehrstuhl für Parodontologie

Prof. Dr. med. Hans Jürgen Heppner, Lehrstuhl für Geriatrie Universität Witten/Herdecke, HELIOS Klinikum Schwelm, Klinik für Geriatrie, Hans.Heppner@uni-wh.de

Conflict of interest statement

The authors state that they have no conflict of interest.

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