THE PERIODONTAL DISEASE CASCADE

Periodontal bacteria form when biofilm starts to build up. Left untreated, this build up can lead to oral infection, an unhealthy balance of bacteria, and the formation of periodontal pockets.¹

Managing periodontal disease can be challenging. By adding ARESTIN, you can treat beyond the physical limitations of SRP. Periodontal bacteria can be treated with SRP. However, within the microanatomy of the teeth, bacteria are able to evade even the most skilled dental professionals, frequently hiding in the following areas²³:

CEMENTO-ENAMEL JUNCTION
Scalloped recesses—not visible to the naked eye—can hide bacteria and allow them to grow⁴

DENTINAL TUBULES
These minute canals extend from the pulp to the dento-enamel junction and can be fully colonized⁵

GINGIVAL EPITHELIUM
Certain bacteria—such as the red and orange complex species—can invade and live within individual cells⁶

Help your patients get more out of their periodontal treatment. Turn this over to see how.

IMPORTANT SAFETY INFORMATION

• ARESTIN is contraindicated in any patient who has a known sensitivity to minocycline or tetracyclines. Hypersensitivity reactions and hypersensitivity syndrome that included, but were not limited to anaphylaxis, anaphylactoid reaction, angioneurotic edema, urticaria, rash, eosinophilia, and one or more of the following: hepatitis, pneumonitis, nephritis, myocarditis, and pericarditis may be present. Swelling of the face, pruritus, fever and lymphadenopathy have been reported with the use of ARESTIN. Some of these reactions were serious. Post-marketing cases of anaphylaxis and serious skin reactions such as Stevens Johnson syndrome and erythema multiforme have been reported with oral minocycline, as well as acute photosensitivity reactions.

Please see additional Important Safety Information on reverse and full Prescribing Information in pocket.
REFERENCES: