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WHY WE MUST PRIORITISE PERIODONTAL DISEASE IN NATIONAL HEALTHCARE POLICY

ABSTRACT

Background: Periodontal disease is a prevalent chronic inflammatory condition with consequences that extend beyond oral health. Despite strong evidence linking it to systemic diseases, mental health outcomes, and economic burden, it remains under-prioritised in public health policy.

Aim: This opinion piece aims to highlight the broader health and economic implications of periodontal disease and to highlight the need to prioritise it within healthcare policy and integrated care frameworks.

Discussion: Emerging evidence highlights significant associations between periodontal disease and systemic conditions, including diabetes, cardiovascular disease, and adverse pregnancy outcomes. Beyond physical health, periodontal disease also contributes to psychosocial challenges such as reduced self-esteem, with potential links to cognitive decline. From an economic perspective, untreated periodontal disease imposes substantial direct and indirect costs on healthcare systems, particularly the NHS, due to increased demand for emergency care, need for advanced dental treatments, and complex care management needs. Preventative care and early intervention are cost-effective strategies to reduce health inequalities that also address the links between oral and systemic health.

Conclusion: Periodontal disease represents an important yet overlooked public health issue. Prioritising prevention, integrating oral health into general health care, and increasing public awareness are essential to improve population health outcomes. This article calls for urgent policy action to recognise periodontal health as integral to overall health and healthcare delivery.

Introduction

Periodontal disease is a chronic inflammatory condition that affects the supporting structures of the teeth, which include the gums and jawbone. While often underestimated, periodontal disease contributes to the existing health disparities as it disproportionately affects the most vulnerable in society.[1] Also, its burden extends beyond oral health, influencing systemic disease risks, mental well-being and health system sustainability.[1] Despite this, periodontal disease remains insufficiently prioritised within public health policy.

Beyond the mouth: the systemic impact of periodontal disease

Periodontal disease is a leading cause of tooth loss, which can compromise chewing ability, aesthetics and overall

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quality of life.[2] However, its relevance as a public health issues arises from its proven links with multiple chronic health conditions. Extensive research has linked periodontitis to systemic conditions such as cardiovascular disease, diabetes, and adverse pregnancy outcomes.[2-4] The chronic inflammation associated with gum disease exacerbates systemic inflammatory responses, increasing the risk of these disease comorbidities.[2] The bidirectional relationship between periodontal disease and diabetes is particularly well established. For example, periodontal inflammation is known to worsen glycaemic control, while poorly controlled diabetes accelerates periodontal destruction.[4-5] In pregnant women, untreated periodontal disease is related to a higher risk of pre-term birth and low birth weight.[3] Individuals with periodontal disease also experience a heightened risk of cardiovascular issues, including atherosclerosis and heart attacks.[4-6] Therefore, the management of these multiple chronic conditions increasingly rely on a shared-risk strategy, in which addressing periodontal health allows mitigating systemic risks and improving overall health outcomes.

The overlooked mental health toll

The visible and functional effects of periodontal disease, such as tooth loss, can impair speech, nutrition, and social confidence.[2] These functional limitations may also translate to psychosocial issues such as low self-esteem, social withdrawal, and depression, which often accompany the condition.[7] Additionally, a recent study suggests a link between chronic gum disease and cognitive decline, including Alzheimer's disease.[8] Such associations underscore the need to view oral health as integral to mental and cognitive well-being.

Economic and healthcare system challenges

The financial burden of untreated periodontal disease is substantial. Tooth replacement options (e.g. dental implants and other prosthodontic options) are prohibitively expensive for many patients and early intervention can prevent these costly procedures, benefiting both patients and healthcare systems.[9] Therefore, preventive care is not only cost-effective, but also essential in preserving natural teeth and avoiding extensive rehabilitative treatments.

The cost of inaction: economic consequences for the NHS

The financial implication of untreated periodontal disease presents a significant challenge to the NHS as periodontal disease carries both direct treatment costs and indirect costs related to management of multimorbidity.[10] A 2024 report estimated that gum disease and tooth decay cost the UK approximately US$22,910 (equivalent to £17,345) per person over a lifetime, and early intervention could reduce this burden by around US$17,728 (equivalent to £13,420) per person.[11] In particular, individuals from the most deprived communities experienced the highest benefits, which were more than threefold higher than the general population; this underscores the socio-economic imperative of early preventative care.[11]

There are also downstream pressures created by untreated oral disease that extend into urgent and secondary care. Emergency dental treatments and complications arising from untreated oral and dental conditions (e.g. dental abscesses, oral infections, and hospital-based tooth extractions, all of which are closely linked to advanced periodontal disease) contribute to over 300,000 hospital admissions annually.[12] These impose additional costs on NHS acute and urgent care services.

The wider health-system consequences of periodontal inflammation and associated systemic conditions are also equally significant as NHS data shows that diabetes alone costs over £10bn annually to the UK health economy and cardiovascular disease costs more than £7bn per year.[13-14] Multiple economic analyses demonstrate effective returns on investments for periodontal care, and population health benefits. A UK evaluation reported that non-surgical periodontal therapy delivers measurable improvements in glycaemic control among people with diabetes and falls within accepted thresholds for cost-effective care, supporting its integration into established diabetes management pathways.[15] Likewise, a modelling report commissioned by the European Federation of Periodontology demonstrated that eliminating gingivitis and preventing periodontitis offers a highly favourable return on investment across several European health systems, including the NHS.[16] Taken together, these findings demonstrate that meaningful investment in periodontal prevention has a strong economic imperative and improvements from periodontal intervention could translate to economic benefits.

A call to action for policymakers

To address the widespread impact of periodontal disease, national healthcare strategies must include:

- **Increased funding for prevention:** Community-based programmes promoting oral hygiene and regular dental check-ups can curb the onset of gum disease. Periodontal disease is largely preventable, yet it continues to affect a significant proportion of the general population. As the national funding for dental care in the UK remains limited, with NHS dentistry experiencing chronic funding shortages, recruitment challenges and accessibility issues, their impact on the management of periodontal conditions are direct.[17] Therefore, targeted investments in periodontal disease prevention and early treatment can reduce costs of rehabilitative dental interventions and system-level costs related to management of conditions with shared risks.
- **Interdisciplinary care models:** Collaboration between medical care professionals and general dental practitioners could improve early identification of periodontal disease in high-risk individuals through opportunistic brief oral health checks, such as asking about bleeding gums, loose teeth or dental attendance, followed by referral to dental services where needed. The established links between periodontal disease and multiple chronic conditions, as well as their economic implications necessitates an interdisciplinary approach to periodontal care.[10] Evidence highlights that improved periodontal management can reduce

hospital admissions, medication needs and specialists services related to chronic illness such as diabetes and cardiovascular conditions.[18-19] These interdisciplinary efficiencies indicate a clear rationale for a preventative approach to periodontal disease which could reduce medical workload, free clinical hours across multiple specialities, and offer meaningful cost-saving benefits to the NHS.

- **Public health campaigns:** Raising awareness about the connection between oral and systemic health can empower individuals to seek timely care and reduce stigma, as missed early signs of periodontal disease represents lost opportunities for early prevention and cost-effective intervention.

Conclusion

Periodontal disease is not just a dental issue – it is a public health crisis with far-reaching consequences for systemic health, mental well-being, and economic sustainability. Policymakers must act now to prioritise prevention, early diagnosis, and comprehensive management which has the potential to deliver significant NHS-wide savings and offer improvements in both oral and systemic disease outcomes. The evidence clearly supports prioritising periodontal disease management as an investment in the nation's health and the future sustainability of the NHS. As the cost of inaction is too great to ignore, proactive investments in preventative strategies and early intervention are urgently required.

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