<https://www.ncbi.nlm.nih.gov/pubmed/30186883>

[Adv Med.](https://www.ncbi.nlm.nih.gov/pubmed/30186883) 2018 Aug 13;2018:4135607. doi: 10.1155/2018/4135607. eCollection 2018.

**Effectiveness of Systematic Periodontal Treatment in Male HIV-Infected Patients after 9 Years: A Case Series.**

[Jordan RA](https://www.ncbi.nlm.nih.gov/pubmed/?term=Jordan%20RA%5BAuthor%5D&cauthor=true&cauthor_uid=30186883)1, [Lucaciu A](https://www.ncbi.nlm.nih.gov/pubmed/?term=Lucaciu%20A%5BAuthor%5D&cauthor=true&cauthor_uid=30186883)2, [Schaper K](https://www.ncbi.nlm.nih.gov/pubmed/?term=Schaper%20K%5BAuthor%5D&cauthor=true&cauthor_uid=30186883)3, [Jöhren HP](https://www.ncbi.nlm.nih.gov/pubmed/?term=J%C3%B6hren%20HP%5BAuthor%5D&cauthor=true&cauthor_uid=30186883)4, [Zimmer S](https://www.ncbi.nlm.nih.gov/pubmed/?term=Zimmer%20S%5BAuthor%5D&cauthor=true&cauthor_uid=30186883)1.

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**Abstract**

**Objective:**

To investigate effectiveness of systematic periodontal treatment in the long term in HIV-infected patients undergoing highly active antiretroviral treatment.

**Methods:**

Longitudinal, prospective, open-label case series over a period of nine years. Periodontal treatment was performed by scaling and root planing and supportive periodontal care (SPC) at regular intervals. To measure effectiveness, reductions of pocket probing depths were defined as primary study endpoint.

**Results:**

During the study period, there was a proportional increase in periodontal pockets ≥4 mm of +53% and in pockets ≥ 6 mm of +100%. Mean pocket depth reductions on patient's level were, however, 0.4 mm nine years after scaling and root planing and supportive periodontal care (*p*=0.180). No teeth were lost during the observation period.

**Conclusions:**

In terms of best evidence available, it is concluded that systematic periodontal treatment including SPC is effective in virologically controlled HIV infection and can be performed in dental practice safely.