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Elmira Bolori graduated first as a dental hygienist at 'Hogeschool van Utrecht'.

There after she achieved her masters in dentistry at Academic Center for Dentistry (ACTA) in 2013. In 2017 she graduated cum laude for specialization in periodontology and implant dentistry at ACTA.

Currently she is working in her own periodontology and implantology clinic in Rotterdam. Furthermore she is working on her PhD at the departments periodontology and dental material sciences at ACTA, with the title "Resin composites and their effect on gingival epithelial cells".

Also she is a member of the committee 'Pregnancy and Periodontal Health' of the Dutch Society of Periodontology (NVvP).

Oral health during pregnancy

Periodontitis is a chronic, multi causal inflammatory disease, caused by an aberrant immune response to dental plaque.

Characteristic of this destructive disease is loss of supporting tissue surrounding the teeth (periodontal ligament and alveolar bone), which could eventually lead to tooth loss.

Gingivitis is the precursor of periodontitis, but is solely located in the gingiva and does not result in loss of support of teeth and is reversible.

Among the pregnant women the prevalence of gingivitis has been shown to be between 30-100%, while the prevalence of periodontitis is between 5-10%. To prevent pregnancy gingivitis it is important to implement a personalized oral hygiene program in the daily care.

Presence of periodontitis in pregnant women has been associated with adverse pregnancy outcomes like preterm birth and low birth-weight. These associations are weak, but nonetheless independently present. The American College of Obstetricians and Gynecologists advises that the pregnant women should be counseled about the maintenance of a good oral hygiene and a referral to a dental professional if needed.