

### Tooth Decay:

Active process of tooth damage resulting from interactions between bacteria, teeth and food

### Primary Factors for Caries to Occur:

- > Host
- > Time
- > Substrate
- > Micro-organisms

### Host Factors:

-Tooth	-Age
-Fluoride	- Morphology
-Carbohydrate level	-Nutrition

### Position of tooth:

- Upper > Lower, due to salivary action
- Post > Anterior, due to pits and fissures

### Morphology:

- Teeth with stagnation area (ie. Malposed teeth, Crowded teeth)

### Smooth Surfaces:

- Interproximal area at contact
- Buccal at cervical third
- Lingual at cervical half

### Host Factors (Part 2):

#### Structure of Tooth:

- > Pits and fissures increase propensity for caries formation
- > So does depth features

#### Fluoride:

- > Acts by reducing enamel solubility

### Host Factors (Part 2): (cont)

- > Inhibits tooth demineralization
- > Enhances remineralization

### Genetics

#### Age:

- 60-90% of school going children
- 100% of adults (65-75years) have missing teeth
- As people age, caries rates and cavity severity increases

#### Carbohydrate (CHO) level:

- Type of CHO
- Amount of CHO
- Frequency of CHO
- Local effect of CHO
- Consistency and refinement of CHO

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### Salivary Flow:

- Salivary glycoproteins
- Washing effect of saliva
- Buffering effect
- Slga
- Antibacterial non-immunological enzymes
- CHO accumulate in poorly rinsed area

### Caries Factors

Protective Factors:	Pathological Factors:
---------------------	-----------------------

- |                 |                    |
|-----------------|--------------------|
| -Saliva         | -Bacterias         |
| -               | -Absence of saliva |
| Antimicrobials  | -Dietary habits    |
| -Fluoride       |                    |
| -Effective diet |                    |

### Bacterial Role in Caries

Germ free animals do not develop caries

Antibiotics fed to animals are effective in reducing incidence and severity of caries

Unerupted teeth do not develop caries

Oral bacteria can demineralise enamel and dentin in vitro and produce caries-like lesions

Bacteria can be isolated from carious lesions

### Bacterial Role in Caries (cont)

Enamel invasion demonstrates microscopically

### Characteristics of Non-Cariogenic Biofilm:

Lower levels of *S.mutans* and lactobacilli

Higher levels of *Actionmyces*, *S.sanguinis*, *Veillonella*

Lower concentrations of lactic acid and higher concentrations of acetic and propionic acids

### Characteristics of Cariogenic Bacteria:

Rate of sucrose consumption is higher

Rate of lactic acid formation

Synthesis more intercellular glycogentype -type polysaccharides

Intra- and extracellular - polysaccharides enhance lactic acid production and colonisation

### Aetiology of Caries

*Streptococcus mutans*: primary agent

*S.sobrinus*

### Secondary Invaders:

- After initial weakening of enamel
- > Lactobacilli
- > *Actinomyces*



### Streptococcus mutans:

Facultative anaerobes

Gram positive

Does not colonize teeth uniformly

Weak ability to absorb to teeth

Low salivary concentrations available for attachment

Antagonises growth of *S.sanguinis*:

- Acid production
- bacteriocins

### Secondary Invaders:

Divided into 2 main groups:

1. Fermentation of glucose produces lactic acid (eg. *L.casei*, *L.acidophilus*)
2. Fermentation produces lactic acids plus acetate, ethanol, carbon dioxide (eg *L.fermentum*)

Rarely isolated in initial caries but predominate in deep cavities

### Actinomyces:

Gram positive non-sporing bacillus

Microaerophilic

Normal microflora of the oral cavity

Acidogenic

Several species implicated but mostly: *A.naeslundii*, *A viscosus*

### Insoluble Glucans

<b>Gram positive Cocci</b>	Gram negative Cocci**
<i>S. mutans</i>	<i>A.viscosus</i>
<i>S.sanguinis</i>	<i>A.naeslundii</i>

> **Caries free adults:**

-*Streptococcus sanguinis* predominates over *Strep.mutans*

> **High Caries adults:**

-*Strep.mutans* prevail over *Strep.sanguinis*

> *Strep.sanguinis* from caries free individuals showed higher H2O2 production than high caries adults

### Role of Strep.mutans:

Several different species:	* <i>S.mutans</i> , <i>S.sobrinus</i> , <i>S.</i>
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*S.mutan* serotypes c,e,f and *S.sobrinus* serotypes d and g are species most commonly found in humans.

> Serotype c most prevalent followed by d and e

### Role of Strep.mutans in Caries:

Cariogenic and initiate caries on smooth tooth surfaces

### Characteristics of *S.mutans*:

- > Potent acidogenic
- > Highly aciduric
- > Synthesize extracellular polysaccharides: Glucan and Levan
- > Synthesize and store intercellular glycogen-like polysaccharides known as amylopectins

### Glucan vs. Levan

Glucan:	Levan:
Extracellular polysaccharide	Extracellular polysaccharide
Glucose polymer	Fructose Polymer
Water insoluble	Water soluble
Adhesive	Less adhesive

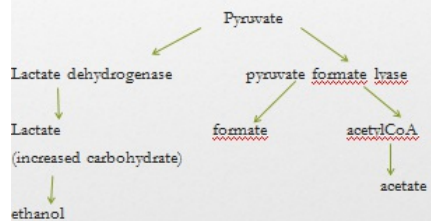
### Glucan Binding Protein:

- > *S.mutans* secretes 3 distinct proteins w/glucan binding activity (GBP-A,GBP-B and GBP-C)
- > Helps in binding of glucan to *S.mutans*

### Dextranases:

- > important constituent of dental plaque
- > enzyme produced by *strp.mutans*
- > destroy and thus bacteria can invade dextran-rich early plaque
- > when used as an antigen,can prevent colonization of organism in early dental plaque

### Glucose Degraded by Bacteria:



Embden-Myerhof Pathway

### Molecular Pathogenesis: *S.mutans*

Mutans streptococci participate in the formation of biofilms on tooth surfaces. These biofilms are known as dental plaque(s). Sucrose is required for the accumulation of mutans streptococci. Also required for this accumulation are the enzymes glucosyltransferases (GTFs), which are constitutively synthesized by all mutans streptococci.

a | Initial attachment of mutans streptococci to tooth surfaces. This attachment is thought to be the first event in the formation of dental plaque. The mutans streptococcal adhesin (known as antigen I/II) interacts with  $\alpha$ -galactosides in the saliva-derived glycoprotein constituents of the tooth pellicle. Other moieties at the surface of mutans streptococci include glucan-binding protein (GBP), serotype carbohydrate and GTFs.



### Molecular Pathogenesis:

#### S.mutans

b | Accumulation of mutans streptococci on tooth surfaces in the presence of sucrose. In the presence of sucrose, GTFs synthesize extracellular glucans from glucose (after the breakdown of sucrose into glucose and fructose), and this is thought to be the second event in the formation of dental plaque. The mutans streptococcal protein GBP is a receptor-like protein that is distinct from GTFs, and it specifically binds glucans. GTFs themselves also have a glucan-binding domain and can therefore also function as receptors for glucans. So, mutans streptococci bind pre-formed glucans through GBP and GTFs, and this gives rise to aggregates of mutans streptococci..

### Stages of Caries Development:

1. Enamel becomes decalcified
2. Small white spot appear
3. Discolouration becomes pronounced
4. Tooth surface softens and decay penetrates through enamel into dentine
5. Caries spreads laterally and in depth
6. Cavitation occurs

### Smooth Surface Caries:

Rarely on buccal and lingual surfaces

Mostly on approximal tooth surfaces just below contact points

*S.mutans* found mostly on white spots

*S.sobrinus* found on caries active sites

### Pit or Fissure Caries

Most caries prone sites: molars, premolars and lingual surface of maxillary incisors

*S.mutans*: -strongest association

*S.sobrinus* - more frequently on molars than anterior teeth

### Pit or Fissure Caries (cont)

*S.salivarius*, *S.sanguinis*, *L.acidophilus*, *L.casei*, *Actiomyces* also found

### Recurrent Caries:

- > Associated with existing restoration
- > *S. mutans* and lactobacilli

### Root Surface Caries:

Seen on cementum and/or dentine when the root is exposed to oral environment

Mostly middle-aged and older adults affected

Prevalent in primitive communities

Associated bacteria: Actinomyces, Rothia dentocariosa, *S. mutans*, lactobacilli

Deeper caries: Propionibacterium, Bifidobacteria, Eubacteria

### Rampant Caries:

Risk Groups:

- > Xerostomic patients (*S. mutans*, lactobacilli)
- > "nursing bottle" (*S. mutans*, *L. fermentum*, *L. plantarum*)

### Caries prevention:

1. Healthy Diet
2. Plaque control
3. Teeth brushing
4. Application of fluoride on tooth surfaces

### Caries prevention: (cont)

5.Applications of sealants on tooth surfaces

### Fluoride in Saliva:

Speeds up crystal precipitation, forming a fluorapatite-like coating more resistant to caries than original tooth structure

### Food W/ Anticariogenic Effect:

Milk	Contains lactose
Cheese	Casien Phosphatase
Fibrous Foods	Raw veg and grains
Sugar substitutes	xylitol, mannitol, sorbitol
Tea	green and black tea

### Vitamin D

Reduces risk of cavities by producing **cathelicidin** and **defensin**.

> These proteins have antibacterial effects to fight bacteria that causes caries

