

Clinical Studies Supporting Periodontal Endoscopy

Subgingival Identification study. SEM evaluation 1

- 42 teeth, 210 sites
- 4 hygienists

95% accuracy in identifying topographical landmarks and features

Extraction Study: SEM evaluation²

- 42 teeth, 210 sites
- Teeth cleaned with aid of dental endoscope (Perioscopy)
- Teeth extracted and SEM evaluated

1.2% of Endoscope aided SRP had residual calculus – mostly at CEJ
Similar study designs in literature showed 10 – 50% residual calculus remaining following traditional SRP w/out endoscope

Endoscopic SRP (Perioscopy)³

- 46 patients, 73 quadrants
- Sites treatment planned for surgery
- Used endoscope and non surgical therapy first
- 1 year follow-up at 3 month intervals

- Treated by 1 hygienist

At 1 year, 71 – 73 quadrants required no flap surgery

Mean attachment gain of 2.06mm

Retrospective look at Perioscopy treatment outcomes after three years (626 sites)⁴

In pockets 4 – 6mm

PD reduction of 1.94mm with endoscope as compared with traditional SRP reported in literature of 1.0mm

Attachment gain of 1.92mm as compared with traditional SRP reported in literature of 0.38mm

In pockets over 6mm

PD reduction of 4.4mm with endoscope as compared with traditional SRP reported in literature of 2.18mm

Attachment gain 4.1mm as compared with traditional SRP reported in literature 0.97mm

1. Endoscope Visualization of the Subgingival Dental Sulcus and Tooth Root Surfaces: Stambaugh, R.V., et al, J. Periodontology, 73; 374-382, 2002.

2. Visualization of Submarginal Gingival Root Surfaces with the Dental Endoscope (abstract) Stambaugh, R.V., et al, Journal of Dental Research – Special Issue 2000;79:36-56

3. Improved CAL and PPD with Endoscope-aided Scaling and Root Planing (abstract) Stambaugh, R.V., et al Journal of Dental Research Special Issue 2003;82:532