

Kuantitatif *Tannerella forsythia* Plak Gigi serta Hubungannya dengan Status Periodontal Penderita Penyakit Jantung Koroner = Relationship Between Quantitative Measurement Of *Tannerella Forsythia* On Dental Plaque And Its Relationship With Periodontal Status Of Patients With Coronary Heart Disease

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Abstrak

Patogenesis terjadinya aterosklerosis pada penyakit jantung koroner telah meluas dari suatu pandangan yang semula etiologi utama karena lemak yang abnormal menjadiao proses inflamasi termasuk periodontitis. *Tannerella forsythia* adalah bakteri negatif Gram, anaerob, berbentuk batang fusiform yang diduga berperan pada kedua penyakit tersebut. Tujuan: Menganalisis perbedaan kuantitatif *T.forsythia* pada plak gigi dengan status periodontal pada penderita PJK dan non PJK. Metode: 66 pasien PJK dan 40 kontrol diperiksa status periodontal dan diambil sampel plak subgingiva dan kuantitatif *T.forsythia* dihitung dengan menggunakan metode real time polymerase chain reaction. Hasil: Kuantitatif *T.forsythia* PJK tidak berbeda dengan non PJK. Tidak terdapat hubungan antara *T.denticola* dengan perdarahan gingival, kedalaman poket, dan kehilangan perlekatan klinis pada penderita PJK dan non PJK. Kesimpulan: Kuantitatif *T.forsythia* penderita PJK tidak berbeda dengan penderita non PJK. Kuantitatif *T.forsythia* tidak berhubungan dengan status periodontal.

.....The pathogenesis of the development of atherosclerosis in subjects with coronary heart disease has evolved to the extent where abnormal fat accumulation was no longer the culprit, but rather a certain inflammatory process, including periodontitis. *Tannerella forsythia* is a Gram-negative anaerobic bacteria, with fusiform rod shape, that has played a role in inducing the development of both diseases. Objective : The aim of this study was to analyze the difference in quantitative measurement of *Tannerella forsythia* accumulated in the plaque and the periodontal status of subjects with and without coronary heart disease. *Tannerella forsythia* was counted by utilizing the Real-Time Polymerase Chain Reaction (RT-PCR). Methods: Periodontal status of 66 CHD patients and 40 controls was obtained. Subgingival plaque was isolated. *Tannerella forsythia* level were measured using real-time PCR. Result: *Tannerella forsythia* level of CHD patients (-6,29 log₁₀ CFU/ml) was significantly different from control (-19,63 log₁₀ CFU/ml). *Tannerella forsythia* was not significantly associated with any periodontal status (p<0.05). Conclusion: *Tannerella forsythia* levels of CHD patients were higher than control. *Tannerella forsythia* was not associated with any periodontal status.