



SIMPLY PERIO™

Most patients won't recognize they have some form of Gum Disease.

- Cardiovascular Disease Aa Tf Td Pg Fp Pl Q
- Stroke Aa Tf Td Pg Fn Pi Cr
- Diabetes
 Aa Tf Td Pg Fn
- Cancer Aa II Id Pg Fn

(Pancreas, Esophagus, Breast, Colon, Lungs, Head & Neck)

- Rheumatoid Arthritis
- Adverse Pregnancy Outcomes (a) (1) (b) (b)
- Inflammatory Bowel Disease (A) (1) (1) (P) (E) (P)
- Fatty Liver Disease Ap Tf Td Pp Fp

of adults over 35

HAVE SOME FORM OF GUM DISEASE

Gone unchecked, pathogens and their toxins can easily move through the bloodstream with far reaching and catastrophic affects on items like the heart, arteries and central nervous system.

OF THOSE WITH DIABETES

also have gum disease lowering glycemic control

MORE LIKELY TO DEVELOP ALZHEIMER'S

if suffering more than 10 years from gum disease

HEART ATTACKS & STROKES ARE

triggered by oral bacteria [1,2,3]

GREATER RISK OF CANCER with gum disease [4]

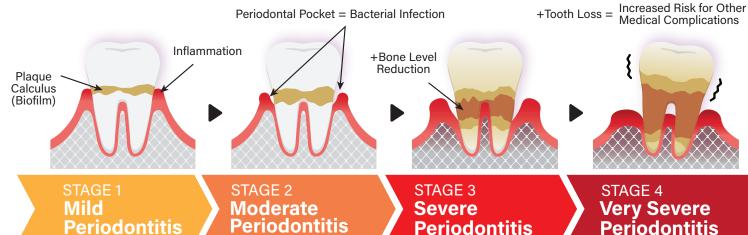
In some it may be easy to spot, however, in the vast majority there may be dangerous and damaging periodontal disease pathogens hiding that can't be identified by a perio probe or a visual exam.

Testing delivers evidence of the presence of damaging levels of periodontal bacteria and drives more patients into the necessary periodontal therapy and better home care regimens they need. In addition, education from testing provides more dedicated patients signing up and committed to in-office oral healthcare regimens.

- 1. Many healthcare providers can miss the critical link between oral health and a patient's dramatic increase in major disease risk.
- 2. Biofilm often contain harmful bacteria including Fusobacterium, Streptococcus, Prevotella, Porphyromonas, & Actinomyces.
- 3. Noninvasive testing drives early detection, effective treatment, & disease monitoring & prevention as well as the data to support the need for positive & ongoing oral health maintenance.
- 4. Testing drives clinical insights for an informed hand off and medical diagnosis opportunity.
- 5. Empowers holistic patient understanding and offers true life-saving treatment adding practice value, driving patient loyalty, & delivering the highest level of patient care.

WHO TO TEST?

- Test everyone (periodontal disease is the most undiagnosed & untreated disease with the highest impact to so many bodily systems and functions.
- Patients with bleeding (Gingivitis) while charting or cleaning and those with mild, moderate, or severe Periodontitis.
- Those patients with unexplained inflammatory biomarkers such as hsCRP.
- All patients pre and post restorative care procedures (braces, extraction, root canals, implants).
- Those currently pregnant or actively pursuing pregnancy. 5.
- All patients at current risk of any systemic health disease.



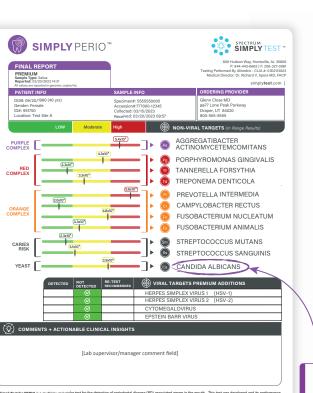
Periodontitis

The beginning of bone and

Periodontitis

Extensive bone and tissue loss. Teeth may become loose.

Plague inflamed gums that bleed easily when charting or cleaning. tissue loss around the tooth. More bone and tissue destruction.



HOW O TEST?

- Collect 1 mL of patient saliva, place in postage paid box, & send sample off to the lab.
- Review results in 24-48 hours on secure HIPAA compliant portal including option to share with patients.
- Evaluate actionable clinical insights and determine next steps or provider hand-off collaborative treatment plan.
- Retest to monitor successful outcomes.

Only noninvasive saliva collection with patented preservation solution that freezes oral bloom pathogen activity at the point of collection for the most accurate patient-specific disease state understanding.

PERIO screening test to include Candida Albicans in oral cavity known to accelerate oral disease growth and progression.



Source Infographic: The American Academy for Oral Systemic Health (AAOSHI)

[1] Pessi T, Karhunen V, Karjalainen PP, et al. Bacterial signatures in thrombosis aspirates of patients with myocardial infarction. Circulation. 2013;127(11):1219-1228. doi:10.1161/CIRCULATIONAHA.112.001254 [2] Freire MO, Van Dyke TE. The mechanisms behind oral-systemic interactions. In: Glick M, ed. The Oral-Systemic Health Connection: A Guide to Patient Care. Chicago, IL: Quintessence; 2014:Chapter 5, 103-119. [3] Leishman SJ, Do HL, Ford PJ. Cardiovascular disease and the role of oral bacteria. J Oral Microbiol. 2010; 2. doi: 10.3402/jomv2i0.5781. [4] Karpiński T. M. (2019). Role of Oral Microbiota in Cancer Development. Microorganisms, 7(1), 20. https://doi.org/10.3390/microorganisms7010020