

# NECROTISING PERIODONTAL DISEASE (NECROTISING ULCERATIVE GINGIVITIS) V2.0

## Comments from the Expert Advisory Group

Local measures are to be used in the first instance:

Antibiotics should only be used if there is evidence of spreading infection, systemic involvement, the person is immunocompromised or has uncontrolled diabetes.

### Local Measures

- Scaling, irrigation and oral hygiene advice.
- Limited debridement/scaling may be tolerated in the acute phase due to pain.
- Consider analgesia.
- Consider the use of 0.2% chlorhexidine mouthwash until acute symptoms are relieved. Caution: very rare risk of anaphylaxis with chlorhexidine.

Necrotising Periodontal Disease is very rare in children under 12 years of age (in the absence of immunosuppression or malnutrition). Consideration should be given to an alternative diagnosis in this age cohort.

## Treatment

If antibiotics deemed clinically indicated:

NECROTISING PERIODONTAL DISEASE ANTIBIOTIC TREATMENT TABLE			
Drug	Dose	Duration	Notes
<b>1st choice options</b>			
<b>Metronidazole</b>	<p><b>1-2 years:</b> 50 mg every 8 hours</p> <p><b>3-6 years:</b> 100 mg every 12 hours</p> <p><b>7-9 years:</b> 100 mg every 8 hours</p> <p><b>10-17 years:</b> 200 mg every 8 hours.</p> <p><b>For children with severe infection</b> (or at extremes of body weight for their age) consider 7.5mg/kg (max. 400 mg) every 8 hours</p> <p><b>Adults:</b>400 mg every 8 hours</p>	<p>3 days</p> <p>(5 days in severe infection or if adequate source control not achieved)</p>	<p>Advise patients to avoid alcohol.</p> <p>Anticoagulant effect of warfarin may be enhanced by Metronidazole.</p> <p>Liquid preparation available: 200 mg/5 mL</p>
<b>2nd choice options / If metronidazole contraindicated</b>			
<b>Amoxicillin</b>	<p><b>1-11 months:</b> 125 mg every 8 hours</p> <p><b>1-4 years:</b> 250 mg every 8 hours</p> <p><b>5-11 years:</b> 500 mg every 8 hours</p> <p><b>For children with severe infection</b> (or at extremes of body weight for their age) consider 30 mg/kg (max. 1 g) every 8 hours</p> <p><b>Adults and children ≥ 12 years:</b></p> <p>500 mg every 8 hours (max. 1 g every 8 hours for severe infection)</p>	<p>3 days</p> <p>(5 days in severe infection or if adequate source control not achieved)</p>	<p>Avoid in penicillin allergy.</p> <p>Liquid preparation available as:</p> <p>125 mg/5 mL</p> <p>250 mg/5 mL</p>

## Weight Based Dosing Tables for Analgesics in Children: [Paracetamol](#), [Ibuprofen](#)

HSE Antimicrobial Resistance and Infection Control Programme

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## Patient information

[HSE A to Z Gum disease - complications](#)