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Halitosis: Screws with a smell

Halitosis is still a large taboo in our society, although it is a common problem that affects nearly 25% of the population. The oral cavity is the major origin of this disease (85%), followed by the ENT-area (10%) and several blood-borne diseases (5%). First the origin of the phenomenon will be discussed. It is explained that volatile sulphur components (e.g. H2S) and amines (e.g. cadaverine) produced by the anaerobic micro flora in the oral cavity are the main contributing fragrances. Furthermore, the different detection methods (subjective organoleptical/objective—Halimeter® and Oral Chroma®) will be highlighted. Although gingivitis, periodontitis and mainly tongue coating are the principle oral causes, also dental implants can strongly contribute to breath odor problems. So, the origin of breath malodor due to implant-involved causes (e.g. peri-implantitis) will be presented. Finally treatment approaches for all these different situations will be proposed and discussed.

Biography

Curd M L Bollen completed his Graduation in 1992 as Dentist at Catholic University Leuven (Belgium). In 1996, he received his PhD at the same university. One year later, he completed his specialization in Periodontology under supervision of Professor D Van Steenberghe. In 2016, he completed his MClinDent in Esthetic and Restorative Dentistry at University of Pacific, US. He published more than 30 scientific articles in peer reviewed international dental journals. He is an Editor in Chief of the *Journal of Dental Health, Oral Disorders & Therapy* and Editor of several online dental journals. He leads a dental clinic in the Netherlands, limited to periodontology, implantology and halitosis. His research interests include Ceramic Dental Implants, Halitosis and Peri-implantitis.

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