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Detection of Loss of Clinically Detectable Mucogingival Junction Due to Chronic Periodontitis in a given Population

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Abstract

Background: The mucogingival junction (MGJ) is one of the important anatomical elements that determines the apical termination of attached gingiva, with the notable exception of the palatal side. Like other organs and tissues in our body, genetics determines its exact location. Its loss is attributed to certain anatomical abnormalities, such as inappropriate tooth eruption or high frenal attachments, as well as illnesses like periodontitis. The current study aimed to assess the frequency of clinically noticeable mucogingival junction (MGJ) loss on the buccal side of the dentate alveolar process. **Results**: The study found a significant association between age and the presence of mucogingival junction (MGJ). Specifically, 21% of patients who were 40 years old or younger had clinically detectable mucogingival junction (MGJ), while 37.5% of patients between the ages of 41 and 45 had clinically detectable mucogingival junction (MGJ). In a comparable manner, it was observed that 29 (25.9%), 13 (11.6%), and 4 (3.6%) of the subjects exhibited clinically detectable mucogingival junction in the age groups of 46-50 years, 50-55 years, and above 55 years, respectively. **Conclusion**: The absence of the mucogingival junction (MGJ) during embryonic development has been linked to the emergence of teeth from the vestibule and anomalous frenal/muscular connections. In our study it was seen that the width of attached gingiva and mucogingival junction was adequate in age group of less than 45 years and inadequate in age group of more than 45 years and it was statistically significant.