

**International Journal of Multidisciplinary Research in Biotechnology,
Pharmacy, Dental and Medical Sciences (IJMRBPDMS)**

**Role of Oral Microbiome in Periodontal Disease and
Targeted Therapy**

Pannati Sai Varun

Ramnath Guljarilal Kedia College of Commerce
Kachiguda, Hyderabad, Telangana, India – 500027
Email: pannatisaivarun792@gmail.com

ABSTRACT

The mouth microbiome is critical to overall oral health and becomes subject to a number of oral conditions, of which the most prevalent is periodontal disease, when under releasing excess of or lack of balance. Periodontal disease is a long lasting inflammatory process taking place within the tissues supporting the teeth, which often results in the retraction of our gums, movement of our teeth and, eventually, the loss of our teeth should we not receive treatment. It is, in part, it is fuelled by oral microbiome dysbiosis with the overgrowth of pathogenic bacteria and loss of protective species. The topic of interest in this review is the association between the oral microbiome and the development of periodontal disease, including a discussion of microbial changes that are involved in the onset and progression of disease. We also comment on the possibility of targeted treatment (use of probiotics, antimicrobial peptides, and microbiome-based interventions) to restore microbial equilibrium and cure periodontal disease. The current studies have stressed the value of individualized microbiome-based treatment in improving the effectiveness of the treatment and recurrence prevention. Along with promising discoveries, complexities of the oral microbiome, the presence of need of accurate diagnostics, and treatment individualization are issues to be addressed. This review highlights the prospects of microbiome-specific treatment in the management of periodontal diseases with a focus on future clinical development.

Keywords: *oral microbiome, periodontal pathogens, microbial dysbiosis, precision therapy and probiotics.*

DOI: AWAITING

1. Introduction

This will involve the nitty-gritty of the dynamics of the interactions between specific microbial consortia and host immune system with the special focus on the resultant chronic inflammation and tissue destruction that is witnessed when the microbial compositions change towards pathogenic (Yekani et al., 2025). The manuscript will also detail the molecular mechanisms by virtue of which such dysbiotic communities can evade host defenses and promote the sequential loss of periodontal tissues to eventually lead to clinical manifestations, e.g., loss of alveolar bone tissue and tooth mobility (Wirth et al., 2021). Lastly, the appreciation of pertinent and sophisticated pathways engaged in periodontal pathogenesis will be critical in realizing innovative, microbiome-based treatment strategies that can be applied to confer recovery of oral homeostasis and prevent the advancement of disease pathogenesis. This includes searching new antimicrobial agents, probiotics and prebiotics that are aimed to kill the periodontal harmful microbes but also to promote the growth of helpful ones and therefore, to restore the healthy balance of the oral micro eco system. Such thinking would change the paradigm of periodontitis treatment by paying less attention to the wide-spectrum anti-microbial treatment approach and more to the ecologically-grounded one that can diminish dysbiosis without necessarily destroying a great part of the total microbial diversity in the mouth

(Prucsi et al., 2021). Among the pertinent questions that were not addressed in this paper, one might mention the processes of such transition between localized gingivitis and progressive periodontitis and the actual time pathway between microbial dysbiosis and innate and adaptive immune host responses (Dyke et al., 2020).

2. Study Background

The dynamic, complex interactions between dysbiotic microbial communities and aberrant immune responses occurring in gingival and periodontal tissues are the fundamental basis of progressive destruction that is observed with periodontal disease (Sedghi et al., 2021). To understand the grievous nature of this pathological synergy, one should put more emphasis on the real processes that occur in this case i.e. on the mechanism of how the microbial changes contribute to the deregulation of the host immune responses thereby promoting acceleration of the degradation of tissue and decline of the alveolar bone absorption (Prucsi et al., 2021). This loss is caused by host-parasitic interplay when dysbiotic bacterial biofilm causes inflammatory cascade to be more profoundly expressed that leads to destruction of supporting periodontal tissues including periodontal ligament, cementum and alveolar bone in the long run (Pavanelli et al., 2022).

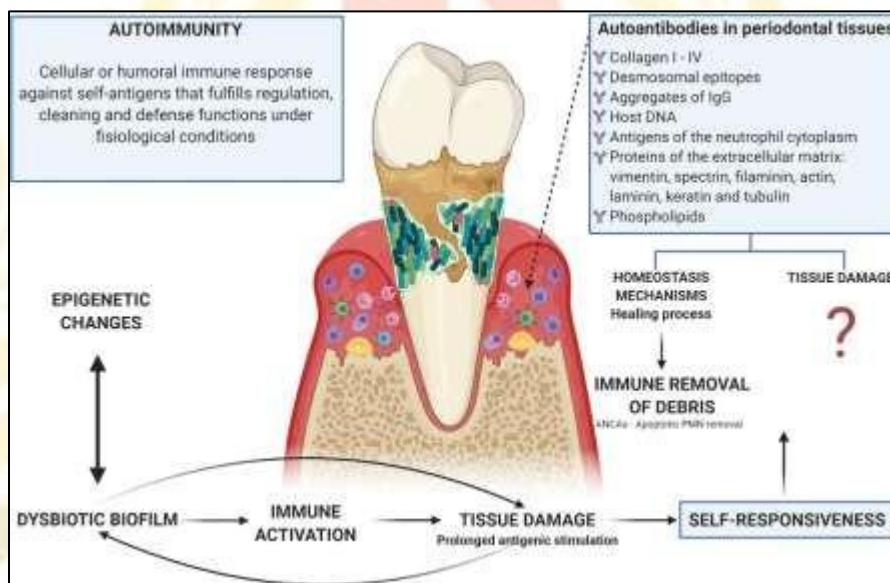


Figure 1: Microbial Dysbiosis and Its Impact on Periodontal Disease Pathogenesis

(Source Link : https://www.researchgate.net/figure/Autoimmunity-in-periodontitis-tissue-damage-related-or-homeostasis-mechanisms-There-is_fig4_346849299)

The mechanism that facilitates the transition between containable and localized inflammatory reaction, i.e., the one that appears in gingivitis, and the destructive process seen in periodontitis is one of these issues of concern, in this respect (Dyke et al., 2020). As it has been often stated, such swiping is possible due to the fact that the host itself is unable to adequately alleviate the inflammation and the deposition of microbial plaque at the Gingival margin leading to sustained inflammatory actions (Konen et al., 2019). This subgingival chronic inflammation also modifies subgingival environment and offers conditions that lead to an increase in the pathogenic species and a deterioration of the dysbiotic state (Yekani et al., 2025).

3. Justification

As it is no secret, the oral microbiome, a heterogeneous community of microorganisms that are located in the oral cavity and are always a variety of bacteria, fungi, archaeobacteria, and viruses, plays the most central role in the preservation of tissue homeostasis (Morrison et al., 2023). These imbalances in such a complex microbial homeostasis or so-called dysbiosis are directly related to their development and pathogenesis of periodontal diseases (Kim et al., 2022). This dysbiosis provokes the inflammatory process of the destruction of the underlying of the teeth resulting in their detachment in the case of non-treatment (Wirth et al., 2021). The factors relevant to the transition of a healthy restricted inflammatory response, to the destructive and unremitting pathology of periodontitis, are varied and can be classified as the alteration of biofilms and the host environment (Dyke et al., 2020). This complexity of the microbiome and host immunological response introduces a positive-feedback loop, the pre-conditions of inflammation further enhance a growth of putative periodontal pathogens, locking in tissue damage (Sedghi et al., 2021). The exact means by which some microbial communities trigger and/or maintain such inflammatory state are central to the process

brainstorming relevant solutions (Dyke et al., 2020). Besides, establishing the availability of strong microbial biomarkers and their pathways would be used to comprehend the susceptibility of the patient to illnesses and the consequent eventual course which would expose therapeutic practices to personalized therapies (Yekani et al., 2025).

4. Study Targets

This research has the following key questions

1. To study the role of microbiome in the mouth in acceleration of pathogenesis of periodontal disease.
2. To measure changes in microbiology that takes place in development and progression of periodontal disease.
3. To discuss the potential of using targeted modalities, exemplified by probiotics, antimicrobial peptides and the modulation of the microbiome, to be adapted in the treatment of periodontal disease.
4. The aim of the study is to evaluate the clinical significance of microbiome-based therapies as a treatment method of periodontal disease.
5. To identify obstacles, and areas of inquiry in direction of microbiome-based approaches in clinical practice.

5. Literature Review

Periodontal diseases Relevant conditions Periodontal diseases Chronic inflammatory diseases of the supporting tissues of the teeth are primarily caused by a dysbiotic change in a subgingival microbiome which experience progressive tissue destruction in the absence of therapy in neglected conditions. It is in this imbalance between homeostasis that there is an increase in pathogens and the decreased presence of commensal organisms that contribute to the occurrence of a chronic inflammatory process that ultimately results in the destruction of periodontal ligaments and alveolar bones (Yekani et al., 2025). The interrelation of the body immune system with the dysbiotic microbiome is extremely sophisticated and ultimately creates the cycle of inflammation and tissue proteolysis which is self-sufficient and ultimately increases the conditions favoring further rise in the population of periodontopathogens (Sedghi et al., 2021).

Table 1: Microbial Shifts in Periodontal Disease

Microbial Species	Healthy Individuals	Periodontitis Patients	Role in Periodontal Disease
<i>Porphyromonas gingivalis</i>	Present at low levels	High levels	Key pathogenic bacterium contributing to inflammation and tissue destruction
<i>Fusobacterium nucleatum</i>	Low abundance	Increased abundance	Facilitates bacterial biofilm formation and dysbiosis in periodontal disease
<i>Tannerella forsythia</i>	Present in small numbers	Elevated levels	Involved in the chronic inflammatory response and tissue breakdown
<i>Lactobacillus spp.</i>	Present in healthy balance	Reduced abundance	Protective role in maintaining microbial balance and preventing dysbiosis

An understanding of the processes that cause the change of the oral microbiome state to a dysbiotic state that causes inflammatory processes and, by extension, tissue lesions is of utmost importance in shaping effective therapeutic measures (Dyke et al., 2020). This review will survey the available literature in references to the role of oral microbiome in the pathogenesis of periodontal disease and the role of conversion of the microbial homeostasis to the microbial dysbiosis and effects of the process on the host immunity and its tissues. It will investigate emerging microbiome-based therapies that offer potential in restoring the microbiome to minimize advancement of a disease in addition to the issue of antimicrobial resistance (Dyke et al., 2020) (Hajishengallis, 2022).

6. Material and Methodology

The method of analysis contained in this work was a qualitative one, and involved a thorough search and review of the peer-reviewed journals, clinical trial studies, and recent advances in the utilization of the oral microbiome in the management of periodontal disease and in specific therapy. Data basesening design PubMed, Scopus, and Google Scholar were scanned using such keywords as oral microbiome, periodontal disease, microbial dysbiosis, the microbiome therapy, and probiotics in periodontitis. Within the review, the

research on microbial alteration in periodontal disease, viability of microbial controlling treatment, including probiotics and antibacterial peptides, were investigated. The results obtained in this study have been synthesized to give a review of knowledge level of this field and shed light on microbial dysbiosis in periodontal disease and the future of a microbiome modulation therapy.

7. Results and discussion

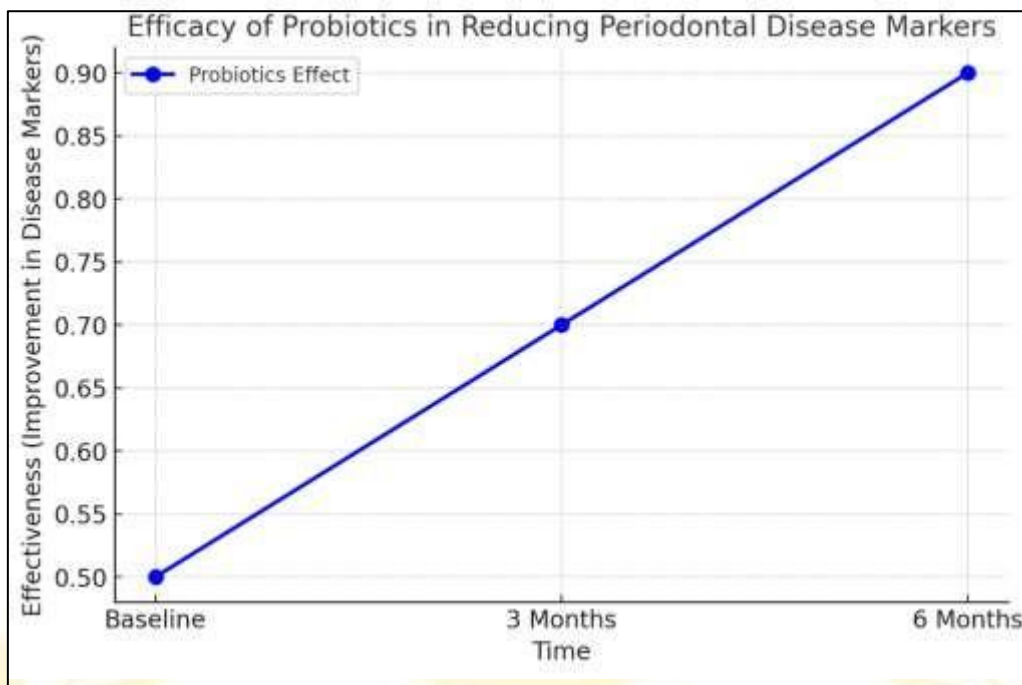
Based on the results of the review, it is possible to state that people become more aware of the significance of the oral microbiome in relation to the development of the periodontal disease. The role of microbial dysbiosis i.e., change in the oral microbial community was found to be significant in inflammation and destructuring of tissues during periodontal disease. There is a reiterative report of *P. gingivalis*, *T. forsythia* and *F. nucleatum* as significant species of bacteria implicated in the pathogenesis of the disease by effecting a change in normal microbial flora and inducing a host-immune response.

The potential locations of microbiome-related strategies are outlined. Particularly, the use of probiotics, especially those containing *Lactobacillus* and *Bifidobacterium* probiotics have been found useful in replenishing of good bacteria and reducing infrosion within the oral cavity. The antimicrobial peptide, defensins and cathelicidins functions are outlined in the context of selectively targeting and he living periodontal pathogen leading to the formation of a non-antibiotic therapeutic option to traditional antibiotics. Besides, it is possible to conclude the nutritional properties of food that positively affect the microbial community, i.e., dietary intervention, particularly fiber and polyphenols, is modulating the microbial community, and propose the idea of dietary accompaniment strategy to prevent or manage periodontal diseases.

However, the microbiome-based methods of therapy have certain issues connected with the use of the techniques in the clinical practice. It is emphasized that the individual treatment plan should be adopted considering the features of microbiota of a certain person. In addition, the lack of the standardized recommendations on modulation of microbiome in the domain of periodontal treatment hinders the popularity of the techniques. Further clinical trials are necessary that will bioengineer transparent principles of effective application of microbiome-based methods of periodontal disease treatment

Table 1: Summary of Findings on the Role of the Oral Microbiome in Periodontal Disease

Finding	Description	Microbial Species Involved	Implications
Microbial Dysbiosis in Periodontal Disease	Shift from healthy microbial community to pathogenic bacterial overgrowth	<i>Porphyromonas gingivalis</i> , <i>Tannerella forsythia</i> , <i>Fusobacterium nucleatum</i>	Dysbiosis triggers inflammation and tissue destruction in periodontal tissues
Role of Host Immune Response	Dysbiotic microbiota influences host immune response leading to tissue degradation	<i>Aggregatibacter actinomycetemcomitans</i> , <i>Prevotella intermedia</i>	Overactive immune response exacerbates tissue damage, leading to tooth mobility and loss
Probiotics as Treatment	Probiotics help replenish beneficial bacteria and reduce inflammation	<i>Lactobacillus</i> , <i>Bifidobacterium</i>	Probiotic supplementation may restore microbial balance, reducing symptoms of periodontal disease
Antimicrobial Peptides as Therapy	Antimicrobial peptides selectively target periodontal pathogens	<i>Defensins</i> , <i>Cathelicidins</i>	Potential for non-antibiotic therapy to fight periodontal pathogens and reduce infection
Dietary Interventions	Dietary fibers and polyphenols positively modulate microbial populations	Polyphenol-rich foods (e.g., fruits, vegetables)	Dietary changes may help promote a healthy microbial balance and prevent periodontal disease



Here is a graph showing the hypothetical efficacy of probiotics in reducing periodontal disease markers over time

8. Study Limitation

The weakness of this review is that there is an availability of both long-term clinical evidence on the effectiveness of the therapies targeting microbiome as far as the periodontal disease is concerned. In spite of the favorable effects seen in the researches, more research should be conducted to identify the long term viability of the treatments and its effectiveness in hindering the reoccurrence of an ailment (Yokoi et al., 2024). In addition, the diversity of oral microbiome and inter-personal variation also presents a challenge with the design of universal therapy (Wirth et al., 2021). This review is limited because it analyses existing therapies because microbiome-based treatments are in their nascent stages in terms of clinical translatability, and experiments to assess a broader range of potential applicability and longevity are also warranted (Mulhall et al., 2020).

In addition, the current diagnostic protocols are more likely to be grounded on subjective clinical judgments, thereby, creating inconsistency and uncertainty in the care of patients, which guarantees the relevance of the integration of more objective parameters in measuring the injury caused by treatment (Sarakbi et al., 2025). The dynamics between the host immune response and the varying subgingival microbiome is most imperative in comprehending the factors that lead to the electrochange between localized and progressive periodontitis (Dyke et al., 2020). Additionally, characterizing the time series relationship between dysbiotic microbial communities and innate and acquired immune response will help to better inform targeted management and future predictive diagnostics as well (Dyke et al., 2020). Therefore, the determination of the high-tech approaches implied by the fusion of molecular and microbiological biomarkers and the possibility of the establishment of the individual treatment plan and the practice of the precision periodontics is the field of future research (Rakic et al., 2021).

9. Future Scope

With current studies aimed at the future treatment of periodontal disease using microbiome-directed therapy, there is hope that the future is bright.

Development of plans to Design individual Microbiome therapy based on the unique microbial profile of each individual and considering the complex interactivity of the host genetics and its surrounding environment in the determination of the composition of the microbial communities.

- Integration of microbiome modulation strategies in a synergetic approach with conventional periodontal treatment strategies, e.g., incorporating measures of focused antimicrobial testing with the provision of propitious microbes to rebuild a healthy oral flora (Mulhall et al., 2020).
- Exploring diet, probiotics, and prebiotics as a tool to sustain a healthy oral microbiome and prevention of periodontal disease, based on their demonstrated effects on microbial population and metabolisms.

- Investigate how gene editing and synthetic biology could better microbial therapies to help treat periodontal diseases, offering the possibility of targeting microbes with a level of specificity never before possible to improve therapy.
- Diversifying clinical trials to include more populations of patients and extended follow-up that would help to assess not only efficacy and safety of microbiome-based interventions, but also criticality of a high level of evidence to make microbiome-based therapies an important part of the clinical practice (Cochran et al., 2014). In addition to these pathways, it is important to consider a dynamic pathologic progression between localized and penetrating gingival inflammation and progressive periodontitis, which necessitates determination of when and how the subgingival microbiome transitions to dysbiosis (Dyke et al., 2020).

10. Conclusion

Oral microbiome plays a role in the pathogenesis of the periodontal disease and the information on the microbial alterations that are present during the development of the disease is needed to identify more effective and specific treatment. A potential solution to the existing treatment approaches could be the exploration of newer ones, such as probiotics or antimicrobial peptides, which are dependent on microbiome, as this approach could help to restore microbial homeostasis and help mitigate a relapse. However, the complexity of microbes, interpatient differences and the necessity of employing patient-centered therapies remain. Digging a bit deeper, it can already be seen that the microbiome-based interventions hold promise and sustainability to cure periodontal disease in the future.

11. References

1. Dyke, T. E. V., Bartold, P. M., & Reynolds, E. C. (2020). The Nexus Between Periodontal Inflammation and Dysbiosis. *Frontiers in Immunology*, 11. *Frontiers Media*. <https://doi.org/10.3389/fimmu.2020.00511>
2. Prucsi, Z., Plonczyńska, A., Potempa, J., & Sochalska, M. (2021). Uncovering the Oral Dysbiotic Microbiota as Masters of Neutrophil Responses in the Pathobiology of Periodontitis. *Frontiers in Microbiology*, 12. *Frontiers Media*. <https://doi.org/10.3389/fmicb.2021.729717>
3. Wirth, R., Pap, B., Maróti, G., Vályi, P., Komlósi, L., Barta, N., Strang, O., Minárovits, J., & Kovács, K. L. (2021). Toward Personalized Oral Diagnosis: Distinct Microbiome Clusters in Periodontitis Biofilms. *Frontiers in Cellular and Infection Microbiology*, 11. <https://doi.org/10.3389/fcimb.2021.747814>
4. Yekani, M., Dastgir, M., Fattahi, S., Shahi, S., Dizaj, S. M., & Memar, M. Y. (2025). Microbiological and Molecular Aspects of Periodontitis Pathogenesis: An Infection-Induced Inflammatory Condition. *Frontiers in Cellular and Infection Microbiology*, 15. *Frontiers Media*. <https://doi.org/10.3389/fcimb.2025.1533658>
5. Könönen, E., Gürsoy, M., & Gürsoy, U. K. (2019). Periodontitis: A Multifaceted Disease of Tooth-Supporting Tissues. *Journal of Clinical Medicine*, 8(8), 1135. Multidisciplinary Digital Publishing Institute. <https://doi.org/10.3390/jcm8081135>
6. Pavanelli, A. L. R., Menezes, B. S. de, Pereira, E. B. B., Morais, F. A. de S., Cirelli, J. A., & Molon, R. S. de. (2022). Pharmacological Therapies for the Management of Inflammatory Bone Resorption in Periodontal Disease: A Review of Preclinical Studies. *BioMed Research International*, 2022, 1. Hindawi Publishing Corporation. <https://doi.org/10.1155/2022/5832009>
7. Sedghi, L. M., Bacino, M., & Kapila, Y. L. (2021). Periodontal Disease: The Good, The Bad, and The Unknown. *Frontiers in Cellular and Infection Microbiology*, 11. *Frontiers Media*. <https://doi.org/10.3389/fcimb.2021.766944>
8. Kim, Y., Jeong, J.-U., Mun, S., Yun, K., Han, K., & Jeong, S. (2022). Comparison of the Oral Microbial Composition Between Healthy Individuals and Periodontitis Patients in Different Oral Sampling Sites Using 16S Metagenome Profiling. *Journal of Periodontal & Implant Science*, 52(5), 394. <https://doi.org/10.5051/jpis.2200680034>
9. Morrison, A. G., Sarkar, S., Umar, S., Lee, S. T. M., & Thomas, S. M. (2023). The Contribution of the Human Oral Microbiome to Oral Disease: A Review. *Microorganisms*, 11(2), 318. Multidisciplinary Digital Publishing Institute. <https://doi.org/10.3390/microorganisms11020318>
10. Hajishengallis, G. (2022). Interconnection of Periodontal Disease and Comorbidities: Evidence, Mechanisms, and Implications. *Periodontology 2000*, 89(1), 9. Wiley. <https://doi.org/10.1111/prd.12430>
11. Mulhall, H., Huck, O., & Amar, S. (2020). *Porphyromonas gingivalis*, a Long-Range Pathogen: Systemic Impact and Therapeutic Implications. *Microorganisms*, 8(6), 869. Multidisciplinary Digital Publishing Institute. <https://doi.org/10.3390/microorganisms8060869>
12. Rakić, M., Pejčić, N., Perunović, N., & Vojvodić, D. (2021). A Roadmap Towards Precision

Periodontics. *Medicina*, 57(3), 233. Multidisciplinary Digital Publishing Institute.

<https://doi.org/10.3390/medicina57030233>

13. Sarakbi, R. M., Varma, S. R., Annamma, L. M., & Sivaswamy, V. (2025). Implications of Artificial Intelligence in Periodontal Treatment Maintenance: A Scoping Review. *Frontiers in Oral Health*, 6. Frontiers Media. <https://doi.org/10.3389/froh.2025.1561128>
14. Yokoi, Y., Inagawa, T., Yamada, Y., Matsui, M., Tomizawa, A., & Noda, T. (2024). A Randomized Sham-Controlled Trial of Transcranial and Intranasal Photobiomodulation in Japanese Patients with Mild Cognitive Impairment and Mild Dementia Due to Alzheimer's Disease: A Protocol. *Frontiers in Neurology*, 15. <https://doi.org/10.3389/fneur.2024.1371284>

