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e chronic in ammatory state associated with diabetes ampli es the risk of periodontitis, leading to the breakdown of periodontal tissues and potential tooth loss. Moreover, compromised wound healing and immune function in diabetic individuals contribute to delayed recovery from oral surgeries and infections. Conversely, emerging evidence suggests that periodontal disease may adversely a ect glycaemic control in diabetic patients. e chronic in ammation associated with periodontitis can contribute to insulin resistance, aggravating the metabolic dysregulation seen in diabetes [1].

E ective management of oral health, particularly periodontal care, may thus play a pivotal role in improving glycaemic control and reducing complications in diabetic individuals. Collaboration between dentistry and diabetes care providers becomes imperative to address these intertwined health issues comprehensively. Integrated healthcare approaches that involve both medical and dental professionals can lead to more e ective prevention, early detection, and management of oral complications in diabetic patients. Additionally, oral health education and preventive strategies must be emphasized in diabetes care plans to empower patients in maintaining optimal oral hygiene. In conclusion, understanding the bidirectional relationship between dentistry and