

MyPerioPath® Antibiotic Options

STEP 1: Determine closest bacterial profile that matches the MyPerioPath® results STEP 2: Locate 1st, 2nd or 3rd choice antibiotic selection - based on patient's antibiotic allergy/intolerance

Bacterial Profile	1st Choice	2nd Choice	3rd Choice
Only Facultative Pathogens	Amoxicillin	Ciprofloxacin	Clindamycin
high: Aa Ec Cs	500 mg tid for 8-10 days, depending on the severity of the infection (Ref.1-3)	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 4,5)	150 or 300 mg tid for 8-10 days, depending on the severity of the infection (Ref. 13-15)
Only Anaerobic Pathogens	Metronidazole	Clindamycin	Ciprofloxacin
high: with Pm low or not detected.	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 10-12)	150 or 300 mg tid for 8-10 days, depending on the severity of the infection (Ref. 13-15)	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 4,5)
Only Anaerobic Pathogens			Matropialogala
prosent: with Pm bigh	Cidrithromycin	Clindamycin	Metroniadzoie
and Pg Tf Td low or	days, depending on the severity of the infection (Ref. 20-26)	days, depending on the severity of the infection (Ref. 13-15)	days, depending on the severity of the infection (Ref. 10-12)
not detected.			
Only Anaerobic Pathogens	Clindamycin	Ciprofloxacin	Clarithromycin
present: with Pm + one or more of Pg Tf Td	150 or 300 mg tid for 8-10 days, depending on the severity of the infection (Ref. 13-15)	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 4,5)	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 20-26)
high.			
Combination Infection:	Amoxicillin	→ If allergic to Amoxicillin, then Ciprofloxacin 500 mg bid 8-10 days, depending on the severity of the infection (Ref. 18,19)	→ If allergic to Ciprofloxacin, then use Clindamycin 150 or 300 mg tid for 8-10 days, depending on the severity of the infection (Ref. 13-15)
Anaerobic Pathogens +	500 mg tid for 8-10 days, depending on the severity of the infection (Ref. 1-3) AND		
Facultative Pathogens high:			
Facultative: Aa Ec Cs	Metronidazole	→ If allergic to Metronidazole, use Clindamycin 150 or 300 mg tid for 8-10 days, depending on the severity of the infection (Ref. 13-15)	→ If allergic to Clindamycin, use Doxycycline 100 mg bid for 1 day, followed by 100 mg qd for 8-10 days depending on the severity of the infection (Ref. 6-9)
Anaerobic: Pg Tf Td En Fn Pi Cr Pm	500 mg bid for 8-10 days, depending on the severity of the infection (Ref. 16,17)		

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REFERENCES

Antibiotic:

Penicillins (Amoxicillin):

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- 2. Systemic Antibiotics in Periodontics; Journal of Periodontology 2004; 75: 1553-1565
- 3. Specific Antibiotics in the Treatment of Periodontitis: A Proposed Strategy: Beikler, Prior, Ehmke, Flemming

Fluoroquinolones (Ciprofloxacin):

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Doxycycline:

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Metronidazole:

- 10. Systemic Antibiotics in Periodontics; Journal of Periodontology 2004; 75: 1553-1565
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Clindamycin:

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Metronidazole and Amoxicillin:

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Metronidazole and Ciprofloxacin:

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Clarithromycin:

- 20. Distribution of Systemic Clarithromycin to Gingiva; J Periodontol 2008;79:1712-1718
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- 25. Iskandar I, Walters JD: Clarithromycin Accumulation by Phagocytes and Its Effect on Killing of Aggregatibacter actinomycetemcomitans; J Periodontol 2011: 82; 497-503
- 26. Rodvold KA, Clinical Pharmacokinetics of Clarithromycin. Clin Pharmacokinet 1999 Nov; 37 (5): 385-398

Definitions:

Anaerobic - living or active in the absence of free oxygen; "anaerobic bacteria" (Pg, Tf, Td, En, Fn, Pm, Pi, Cr)

Facultative bacteria can use either dissolved oxygen or oxygen obtained from food materials such as sulfate or nitrate ions. In other words, facultative bacteria can live under aerobic, anoxic, or anaerobic conditions. (Aa, Ec, Cs)

High Levels of Bacteria Present = Pathogen levels above reference lines or at a level deemed by a healthcare professional to be significant to address with a systemic antibiotic. The use of systemic antibiotics should be administered responsibly.

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