<table>
<thead>
<tr>
<th>Periodontitis grade</th>
<th>Grade A: Slow rate of progression</th>
<th>Grade B: Moderate rate of progression</th>
<th>Grade C: Rapid rate of progression</th>
</tr>
</thead>
<tbody>
<tr>
<td>Direct evidence of progression</td>
<td>Longitudinal data (radiographic bone loss or CAL)</td>
<td>Evidence of no loss over 5 years</td>
<td>&lt;2 mm over 5 years</td>
</tr>
<tr>
<td>% bone loss/age</td>
<td>&lt;0.25</td>
<td>0.25 to 1.0</td>
<td>&gt;1.0</td>
</tr>
<tr>
<td>Case phenotype</td>
<td>Heavy biofilm deposits with low levels of destruction</td>
<td>Destruction commensurate with biofilm deposits</td>
<td>Destruction exceeds expectation given biofilm deposits; specific clinical patterns suggestive of periods of rapid progression and/or early onset disease (e.g., molar/incisor pattern; lack of expected response to standard bacterial control therapies)</td>
</tr>
</tbody>
</table>

**Primary criteria**

**Grade modifiers**

- **Risk factors**
  - Smoking
  - Non-smoker
  - Smoker <10 cigarettes/day
  - Smoker ≥10 cigarettes/day
- **Diabetes**
  - Normoglycemic/no diagnosis of diabetes
  - HbA1c <7.0% in patients with diabetes
  - HbA1c ≥7.0% in patients with diabetes

**Risk of systemic impact of periodontitis**

- **Inflammatory burden**
  - High sensitivity CRP (hsCRP)
  - <1 mg/L
  - 1 to 3 mg/L
  - >3 mg/L

**Biomarkers**

- **Indicators of CAL/bone loss**
  - Saliva, gingival crevicular fluid, serum
  - ?