

## ABSTRACT

**Introduction:** Diabetes is a condition where the body either fails to produce insulin (type 1 diabetes) or the insulin that is produced is no longer as effective (type 2 diabetes) which implies that chronic glycaemic control is a better predictor of outcome than is intraoperative blood glucose (BG) level. Despite expressed intuitive concerns regarding oral surgery in the poorly controlled diabetic patient, there are no prospective studies on complications or wound healing of diabetic patients after dental extractions.

**Aim and objectives:** The aim of this study was to determine whether glycaemic control influences healing after dental extraction through Assessing the Epithelialization of extraction sockets and gross wound healing based on PP Blood sugar level and HbA1c values.

**Materials and methods:** 100 diabetic patients who required dental extractions in this prospective observer-blinded study. Epithelialization of extraction sites was assessed relative to the patient's history, non-fasting blood glucose levels, and glycosylated haemoglobin levels.

**Results:** There was no statistically significant difference in the rate of post extraction epithelialization between the diabetes patients with the operative BG level of 180mg/dl or less and those with greater than 180mg/dl. There was also no statistically significant difference in the rate of post extraction epithelialization between diabetic patients with glycosylated Hb level of 7 % or less, 7.1% to 9 % or greater than 9%.

**Conclusion:** This study has concluded that healing of extraction socket is not greatly influenced by glycaemic control. However presiding factors like patient's oral hygiene and patients ability and cooperation to maintain and monitor blood sugar level periodically has been emphasized.

**Keywords:** epithelialization, glycosylated Hb, glycaemic control.