DIAGNOSTIC APPROACH FOR PERIODONTAL EDS	
Name:	Gender:

Date:

<u>Clinical diagnosis of pEDS</u>: Three major criteria plus one minor criterion have to be present.

MAJOR CRITERIA	-		
Early and severe periodontitis (childhood or adolescence)	🗖 yes	🗖 no	🗖 not clear
Lack of attached gingiva	🗖 yes	🗖 no	🗖 not clear
Pretibial plaques	🗖 yes	🗖 no	🗖 not clear
First-degree relative who meets clinical criteria (\rightarrow autosomal dominant inheritance)	□ yes	🗖 no	🗖 not clear
MINOR CRITERIA			
Easy bruising to mild trauma	🗖 yes	🗖 no	not clear
Joint hypermobility (not generalized, mostly distal joints; elbows, knees, hips, wrist, and / or ankle may also be affected)	□ yes	🗖 no	🗖 not clear
Skin hyperextensibility and fragility	🗖 yes	🗖 no	🗖 not clear
Abnormal scarring (wide or atrophic)	🗖 yes	🗖 no	not clear
Increased rate of infections	🗖 yes	🗖 no	not clear
Hernias	🗖 yes	🗖 no	not clear
Acrogeria	🗖 yes	🗖 no	not clear
Prominent vasculature	🗖 yes	🗖 no	🗖 not clear

Confirmatory molecular testing is obligatory to reach a final diagnosis (specific mutations in *C1R* or *C1S* encoding subunits C1r and C1s of the first component of the classical complement pathway).

Please visit the website www.p-EDS.com and feel free to contact us!

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