

periodontal disease among a sample of nephrologists and nurses who work with chronic kidney disease not yet on dialysis”, *J Bras Nefrol* 2011; 33(4): 431-435;

[11] Haider R. S., Tanwir F, Phil M., Momin A. I., “Oral aspects of chronic renal failure”, *Pakistan Oral and Dental Journal* Vol 33, №1 (April 2013), p. 87-90;

[12] Alamo M. S., Esteve G. C., Perez S. G. M., “Dental considerations for the patient with renal disease”, *J Clin Exp Dent*, 2011, 3(2): e 112-9;

[13] Ioannidou E, Swede H., “Disparities in periodontitis prevalence among chronic kidney disease patients”, *J Dent Res* 90(4): 2011, 730-734;

[14] Bastos J. A., Diniz C. G., Bastos M. G., Vilela E. M., Silva V. L., et al., “Identification of periodontal pathogens and

severity of periodontitis in patients with and without chronic kidney disease”, *Archives of Oral Biology* 56(2011), 804-811;

[15] Reeves J., “Oral health problems in the renal patient”, *Dental Nursing*, November 2008, Vol 4, №11, p. 618-621;

[16] De Rossi S. S., Cohen D. L., “Renal disease”, *Burket’s Oral Medicine*, 2006, p. 363-383;

[17] Nibali L., Farias B. C., Vajgel A., Tu y. K., Donos N., “Tooth loss in aggressive periodontitis: a systematic review”, *J Dent Res* 92(10) 2013, p. 868-875;

[18] Thomas Ch., “The roles of inflammation and oral care in the overall wellness of patients living with chronic kidney disease”, www.dentaleconomics.com, August 2008, p. 111-118;