Aim: To summarize a basic knowledge of relations between oral health and heart diseases. And further to approach an issue of focal infection of odontogenic origin. **Introduction:** There is a considerably high occurrence of parodontopaties and heart diseases at the present time and society. Parodontopatie caused by the action of plaque is a source of focal infection in our bodies. A risk of infective endocarditis emergence is pretty high, the risk of atherosclerosis emergence and complications related is much higher.

Controls and method: My research work was conducted in two ways. 1/ First way of using two types of questionnairs: one type designed for dental hygienists and second type designed for dentists. This "questionnair" research work consisted of questions focused on focal infection of a dental origin. 2 / Second way using clinical examinations. I worked with a group of patients with a certain heart disease. There was a need to exclude the presence of focal infections by a dentist before their heart surgeries. We carried out an examination of their oral cavity as well as an assessment of their oral hygiene using indices PBI and CPI-TN

Results: First hypothesis assumed that approximately 30 % of dental hygienists consider tooth decay a significant source of focal infections of odontogenic origin. This first hypothesis was met, because 58 % of respondents agree with this opinion. Second hypothesis assumed that at least 85 % of respondents consider periodontal pockets as a significant FIDP source. This hypothesis was met, because 99 % of respondents find this high risk factor as very important. Further, this questionnair research work confirmed, that more than 60 % of dental hygienists work in antibiotic aperture with these risk patients. This fact meets third hypothesis, where was assumed 55 % of dental hygienists working in antibiotic aperture. Results of case studies showed lack of oral health care in the group of 97

patients with heart disease. Thus, fourth hypothesis assuming that majority of researched patients would have at least in some sextant CPI-TN marks greater than 1, was met too.

Conclusion: According to various studies we conclude a tight relation between parondotopaties caused by action of plaque and a greater risk of cardiovascular diseases emergence. Due to these facts, it is highly recommended to take care of our oral health preemptively with a greater

recommendation for those, who have a disposition to cardiovascular diseases. Regular visits to dentist and dental hygienist are the best, what we can do for complete oral health.

Information leaflet alerting to the fact, that lack of oral health care negatively affects the cardiovascular system is an output of this Bachelor's thesis too.