Two Year RCT of Two Dentifrices for Prevention of Periodontitis



Reference: Papas AS, Martuscelli G, Singh M, He T, Bartizek RD, Biesbrock A. J Periodontol. 2007 Aug; 78(8): 1505-1514

CONCLUSION

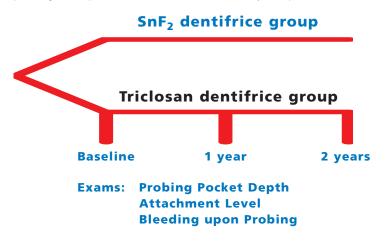
• The study results establish the comparable therapeutic benefits for the stabilized 0.454% stannous fluoride/sodium hexametaphosphate (SHMP) dentifrice in the prevention of periodontal attachment loss when compared to the triclosan/copolymer control.

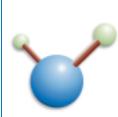
OBJECTIVE

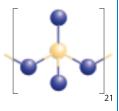
To compare the efficacy of a 0.454% stannous fluoride/SHMP dentifrice relative to a positive control triclosan/copolymer dentifrice for the prevention of periodontal attachment loss.

MATERIALS AND METHODS

- This was a two-year, randomized, double-blind, parallel-group study.
- A 0.454% stannous fluoride/SHMP dentifrice was tested relative to a commercially available positive control dentifrice (0.30% triclosan/2.0% Gantrez copolymer) in medication induced xerostomic adults who were previously identified in a one-year run-in phase.
- Among 685 40-80 yr old subjects who received one-year examination, 440 demonstrated active progression of periodontitis with at least one tooth having a site with equal to or greater than 3mm attachment loss.
- Following baseline measurements subjects were stratified based on gender and baseline attachment level into two groups. Subjects were instructed to brush twice daily for 60 seconds using their assigned product.
- Clinical examinations including probing pocket depth, attachment level, and bleeding upon probing were performed at baseline, 1 and 2 years post baseline.









Two Year RCT of Two Dentifrices for Prevention of Periodontitis



RESULTS

- Of the 440 subjects with active progression of periodontitis, 392 of them completed the study. 334 subjects were determined evaluable across all visits.
- During the run-in phase, the average periodontal attachment loss was 1.33 mm and the periodontal pocket depth increased 0.95 mm.
- Over the course of the 2 year active treatment phase, attachment gain observed was 0.77 mm for the treatment group and 0.79 mm for the positive control group (not significant).
- The pocket depth decreased 0.57 mm for the test group and 0.53 mm for the positive control group.
- The change of the attachment level and pocket depth versus baseline was statistically significant (p<0.01) for each individual test group.

