

Impact of smoking on gums

Submission date 15/01/2015	Recruitment status No longer recruiting	<input type="checkbox"/> Prospectively registered <input type="checkbox"/> Protocol
Registration date 04/02/2015	Overall study status Completed	<input type="checkbox"/> Statistical analysis plan <input checked="" type="checkbox"/> Results
Last Edited 22/01/2019	Condition category Oral Health	<input type="checkbox"/> Individual participant data

Plain English summary of protocol

Background and study aims

Cigarette smoking is one of the major risk factors for gum disease. The aim in this study is to assess the impact of cigarette smoking on healthy and diseased gum tissue.

Who can participate?

Adult smokers and non-smokers

What does the study involve?

Samples will be obtained of the fluid secreted where the gums meet the teeth.

What are the possible benefits and risks of participating?

There are no known benefits to participants taking part in this study. There are no known risks to participants taking part in this study.

Where is the study run from?

Ondokuz Mayıs University (Turkey)

When is the study starting and how long is it expected to run for?

From September 2012 to March 2014

Who is funding the study?

Ondokuz Mayıs University (Turkey)

Who is the main contact?

Associate Professor Muge Lutfioglu

Contact information

Type(s)

Scientific

Contact name

Dr Muge Lutfioglu

ORCID ID

<https://orcid.org/0000-0003-1499-5902>

Contact details

Ondokuz Mayıs University
Dental Faculty
Samsun
Türkiye
55139

Additional identifiers**Protocol serial number**

Ref No: B.30.2.ANK.0.21.63.00/824-02/9-8

Study information**Scientific Title**

Interleukin 8 and lipoxin a4 levels in the gingival crevicular fluid of smokers and non-smokers with different periodontal diseases: a cross-sectional study

Study objectives

Investigate the effect of cigarette smoking on gingival crevicular fluid levels of interleukin 8 and lipoxin A4, cytokines that affect the polymorphonuclear functions in inflammatory response, in healthy individuals and those with periodontal disease because:

1. Cigarette smoking is one of the major risk factors for periodontal disease and has effects on the pathogenesis of the periodontal disease.
2. Smoking alters the host's response, including vascular function, neutrophil/monocyte activities, adhesion molecule expression, antibody production and cytokine and inflammatory mediator release.
3. Loss of proinflammatory mediators is the turn off signal for inflammation, ending subsequent responses passively
4. Resolution of inflammation and the return to homeostasis is an active and highly regulated biochemical process that is thought to be programmed at the tissue level.
5. Failure to remove the noxious products of smoking will have negative effects on cellular functions of the immune system and inflammatory cells might cause chronic and pathological lesions in healthy and diseased periodontal tissues.
6. Specialised immunoresolvents comprise endogenous molecules including resolvins, lipoxins, protectins and maresins, which actively drive the termination of the inflammation.

Ethics approval required

Old ethics approval format

Ethics approval(s)

Local ethics committee of the Dental School of Ankara University, 19/07/2011, reference number B.30.2.ANK.0.21.63.00/824-02/9-8

Study design

Cross-sectional observational study

Primary study design

Observational

Study type(s)

Other

Health condition(s) or problem(s) studied

Periodontal disease is a leucocyte-mediated inflammatory disease characterised by inflammation of the supporting tissues of the teeth induced by micro-organisms that stimulate the host immune and inflammatory responses.

Interventions

Gingival crevicular fluid samples will be obtained from the orifice of the gingival pocket, using commercially available periopaper strips for the assessment of:

1. Plaque index
2. Gingival index
3. Probing depth
4. Clinical attachment level
5. Bleeding on probing

Intervention Type

Other

Primary outcome(s)

1. Silness and Loe plaque index
2. Loe and Silness gingival index
3. Probing pocket depth
4. Clinical attachment level
5. Bleeding on probing

Clinical measurements will be performed on six sites per tooth (mesio-buccal, mid-buccal, disto-buccal, mesio-lingual, mid-lingua and, disto-lingual) using a Williams periodontal probe calibrated in millimetres on the patient's first visit to have periodontal treatment.

Key secondary outcome(s)

N/A

Completion date

30/03/2014

Eligibility

Key inclusion criteria

1. Smokers (≥ 5 years of duration and ≥ 15 cigarettes per day)
2. Non-smokers (never smoked)
3. Age ≥ 18 years old
4. ≥ 16 teeth

Participant type(s)

Other

Healthy volunteers allowed

No

Age group

Adult

Lower age limit

18 years

Sex

All

Key exclusion criteria

1. History of cancer
2. History of rheumatoid arthritis
3. History of diabetes mellitus
4. History of cardiovascular diseases
5. Compromised immune system
6. Pregnancy
7. Menopause
8. Lactating
9. Ongoing drug therapy that may affect the clinical features of periodontitis
10. Systemic antimicrobials during the 6 weeks preceding the baseline examination
11. Any dental treatment during the past 6 months

Date of first enrolment

01/09/2012

Date of final enrolment

30/03/2014

Locations**Countries of recruitment**

Türkiye

Study participating centre

Ondokuz Mayıs University

Dental Faculty

Samsun

Türkiye

55139

Sponsor information

Organisation

Ondokuz Mayıs University

ROR

<https://ror.org/028k5qw24>

Funder(s)

Funder type

University/education

Funder Name

Ondokuz Mayıs University (Turkey)

Results and Publications

Individual participant data (IPD) sharing plan

IPD sharing plan summary

Available on request

Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
Results article	results	01/08/2016	22/01/2019	Yes	No