# Assessment of oral malodour and tonsil bacteria after gargling of throat with an antiseptic

Submission date	Recruitment status	Prospectively
12/08/2015	No longer recruiting	[_] Protocol
Registration date	Overall study status	[_] Statistical anal
19/08/2015	Completed	[_] Results
Last Edited	Condition category	[_] Individual part
19/08/2015	Ear, Nose and Throat	[] Record update

#### Plain English summary of protocol

#### Background and study aims

Other than the mouth, the ear, nose and throat (ENT) region is one of the areas most affected by bad breath, also known as halitosis or oral malodour. It is thought that one of the main causes of bad breath is an infection in the tonsils on either side of the back of the throat. However, the link between healthy tonsils to halitosis is not well studied. It is thought that the bacteria which are always present on the tonsils, even if there is no infection, produce volatile sulphur compounds (VSCs), which lead to bad breath. The aim of this study is to find out whether people with healthy tonsils can still suffer from halitosis, and if gargling with an antibacterial mouthwash can make a difference.

#### Who can participate?

Patients who think they have bad breath, and who have not been on antibiotics or seen an ENT doctor for sinus or tonsil problems within the past 3 months.

#### What does the study involve?

Participants are randomly divided into three groups. The first group gargles a benzethonium chloride mouthwash four times a day for nine days. The section group gargles an inactive (placebo) mouthwash containing sterile distilled water containing the same artificial colorants as in the active mouthwash four times a day for nine days. The third group are instructed not to gargle anything for the nine days of the study. Before the study begins and after it is finished, the levels of the VSC's in the mouth are measured. Patients are also asked how strong they think their bad breath is. During the nine days of the study, all participants have their teeth professionally cleaned by a dentist every three days.

What are the possible benefits and risks of participating?

Possible benefits for participants include possible improvement in bad breath. Risks associated with participation include allergy for antiseptic and spending time to visit hospital for PMTC.

#### Where is the study run from?

Division of Periodontal Health Promotion, Aichi Gakuin University Dental Hospital (Japan)

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- ed in last year

When is the study starting and how long is it expected to run for? July 2010 to March 2016

Who is funding the study? The Ministry of Education, Culture, Sports, Science and Technology (Japan)

Who is the main contact? Dr Mitsuo Fukuda Fukuda-m@dpc.agu.ac.jp

## **Contact information**

**Type(s)** Public

**Contact name** Prof Mitsuo Fukuda

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### Type(s)

Scientific

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## Additional identifiers

EudraCT/CTIS number

**IRAS number** 

ClinicalTrials.gov number

# Secondary identifying numbers N/A

## Study information

#### Scientific Title

Assessment of oral malodour and tonsillar microbiota after gargling in orophrynx with benzethonium chloride

#### Study objectives

1. The microbiota of healthy tonsil is one of the source of halitosis.

2. Management of the microbiota by gargling with antiseptics reduces halitosis.

#### Ethics approval required

Old ethics approval format

#### Ethics approval(s)

The Ethics Committee of Aichi Gakuin University, 23/07/2010, ref: 227; and 14/03/2014, ref: 371.

#### Study design

Single-centre randomised controlled trial.

#### **Primary study design** Interventional

## Secondary study design

Randomised controlled trial

#### Study setting(s) Home

Study type(s)

### Treatment

#### Participant information sheet

#### Health condition(s) or problem(s) studied

Halitosis without periodontitis and otolaryngological disease.

#### Interventions

Participants are randomly allocated into three groups:

1. Test Group: Instructed to gargle with mouthwash containing 0.004% benzethonium chloride and artificial colorants (tartrazine and Brilliant Blue FCF) for 1 minute, four times per day for 9 days.

2. Placebo Group: Instructed to gargle with the placebo mouthwash (sterile distilled water containing the artificial colorants) for 1 minute, four times per day for 9 days.

3. Control Group: Instructed not to gargle during test period.

During the 9-day test period, all of the participants underwent professional mechanical tooth

cleaning (PMTC) every 3 days. The volatile sulfur compounds (VSCs) concentration in mouth air, organoleptic score and profile of tonsillar microbiota of halitosis patient were assessed before and after gargling with benzethonium chloride.

#### Intervention Type

Drug

#### Drug/device/biological/vaccine name(s)

Benzethonium chloride

#### Primary outcome measure

Comparing the concentrations of VSC's (H2S, CH3SH, and CH3SCH3) in mouth air, measured using OralChroma, and organoleptic score, determined using the Rosenberg's scale. Outcomes are measured at baseline and after 9 days.

#### Secondary outcome measures

Outcomes are measured at baseline and after 9 days:

- 1. Concentrations of VSCs are measured using Oral Chroma.
- 2. Organoleptic assessment is judged on a 0-5 scale (Rosenberg's scale).
- 3. Tongue coating score is recorded with Kojima's scale.
- 4. Bacterial profiles are assessed by T-RFLP analysis.

#### Overall study start date

24/07/2010

Completion date

31/03/2016

## Eligibility

#### Key inclusion criteria

1. To have visited the Aichi Gakuin University Dental Hospital and claiming oral malodour

2. No history of antibiotic use within the past 3 months

3. No history of otolaryngology consultation due to sinusitis, tonsillitis and tonsilloliths within the past 3 months

### Participant type(s)

Patient

### Age group

Not Specified

### Sex

Both

# **Target number of participants** 150

Key exclusion criteria

1) Otolaryngological disease at baseline

2) Periodontitis

- 3) To have used a gargle on the day of screening
- 4) A negative result for an organoleptic assessment (score 0)
- 5) Less than 26 ppb CH3SH in mouth air
- 6) Score of more than 30% on the Plaque Control Record

# Date of first enrolment 01/08/2010

Date of final enrolment 31/12/2015

## Locations

**Countries of recruitment** Japan

**Study participating centre Aichi Gakuin University Dental Hospital** Division of Periodontal Health Promotion 2-11 Suemori-Dori Chikusa-Ku Nagoya Japan 464-8651

## Sponsor information

**Organisation** Aichi Gakuin University

#### Sponsor details

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**Sponsor type** University/education

ROR https://ror.org/01rwx7470

## Funder(s)

**Funder type** Government

**Funder Name** The Ministry of Education, Culture, Sports, Science and Technology (JAPAN)

## **Results and Publications**

#### Publication and dissemination plan

A pilot data is planned to publish in an international journal of dental field. Further plans to be confirmed at a later date.

Intention to publish date 31/03/2016

Individual participant data (IPD) sharing plan

**IPD sharing plan summary** Not provided at time of registration