

GUM TONE

Efficacy Of Herbo-Mineral Product, Gum-Tone Powder, In The Control Of Bleeding And Spongy Gums when used As An Astringent, Antiinflammatory And Dentrifrice

(Conducted by Dr. Hema Seshan, Dr. Pushpanjali, and Dr. Roopa. D.A)

The aim of this study was to observe the efficacy of a herbo-mineral product - GUM TONE powder, in the control of bleeding, spongy gums when used as an astringent, antiinflammatory agent and on removal of local factors (calculus, debris), as an dentrifrice. A total of 100 subjects (45 female and 55 male) with duration of complaint of bleeding spongy gums (gingiva) since 4-5 months, i.e., cases of chronic gingivitis were selected for this study.

GROUP A- (Scaling + GUM TONE) Subjects underwent oral and were administered with Gum Tone powder.

GROUP B - (Only Scaling) Subjects underwent oral prophylaxis and deprived of Gum Tone powder.

GROUP C- (Only GUM TONE, no Scaling) Subjects did not undergo oral prophylaxis and were treated with only Gum Tone powder

GROUP D-(Scaling/Placebo) Subjects underwent oral prophylaxis and treated with placebo formulation.

GROUP A showed highly significant scores compared to all other 3 groups ($P > 0.01$) When only scaling i.e., GROUP B and only (GUM TONE) i.e., GROUP C, were compared, the GROUP B (only scaling) showed good results over only GUM-TONE (i.e., GROUP C). ($P > 0.001$ - highly significant). Therefore scaling is a prerequisite for removing the local irritants which causes gingival inflammation. GUM TONE as any other commercially available product could be used as an adjuvant to reduce bleeding, as an astringent, anti-inflammatory agent.

When group A (scaling + GUM TONE) was compared with GROUP C (GUM TONE powder only), it showed highly significant results. ($P > .001$). This shows that GUM-TONE powder when given after scaling, as a dentrifrice or as an astringent to massage the gum showed reduction as in OHI status and bleeding than just using GUM TONE powder dentrifrice or gum-paint.

Again when group A (GUM TONE powder + scaling), was compared with GROUP D (Placebo drug + scaling), GROUP A showed lesser scores at the 3rd week. There were marked reductions in Oral Hygiene Index (OHI)-S & papilla bleeding index (PBI) scores in GROUP A. This again shows scaling + GUM TONE powder is better than just scaling to reduce bleeding or removal of the local deposits in the mouth ($p > .001$ highly significant).

Gumtone gel, a useful herbal formulation used as chemical plaque control agent and leading to improvement in plaque and gingival status

(Published in Australian Dental Journal 2010....conducted by Dr. A. R. Pradeep)

Short-term clinical effects of commercially available gel containing Acacia Arabica (GUM TONE): a randomized controlled clinical trial

Randomized, placebo controlled clinical trial was conducted by Dr. A.R Pradeep at Department of Periodontics, Government Dental College and Research Institute, Fort, Bangalore, Karnataka.

Ninety subjects diagnosed with chronic generalized gingivitis were selected and divided in three groups.

Group I - placebo gel, Group II - Gum Tone gel and Group III - 1% Chlorhexidine gel. The efficacy of Gum Tone gel was comparable to Chlorhexidine (CHX). Significant clinical improvement in gingival and plaque index scores was observed. Unlike Chlorhexidine gel, Gum Tone gel was not associated with any discoloration of teeth or unpleasant taste.

Comparative Evaluation of Clinical & microbiological effects of GUMTONE gel & powder v/s 1% Chlorhexidine and Placebo gel on 120 patients

(Published in Australian Dental Journal 2012....conducted by Dr. A. R. Pradeep)

The trial was conducted by Dr. A. R. Pradeep at The Department of Periodontics, Government Dental College & Research Institute, Bangalore, Karnataka, India.

120 subjects with chronic generalized gingivitis were selected and randomly divided into four groups:

Group 1 - placebo group;

Group 2 - GUM TONE gel group;

Group 3 - GUM TONE powder group; &

Group 4 - 1% CHLORHEXIDINE gel group.

The trial proves that GUMTONE possess equal efficacy as Chlorhexidine & better patient compliance.

Subjects were assessed for **Microbial counts of plaque samples, the gingival index (GI) and the plaque index (PI)** were evaluated at baseline, 6 weeks, 12 weeks and 24 weeks. Both the GUM TONE gel and GUM TONE powder group showed significant improvement in the **PI** and **GI** scores at all time intervals.

Microbial counts were significantly reduced from baseline to 24 weeks and the results were comparable to 1% chlorhexidine gel.

Unlike Chlorhexidine

- GUMTONE had no teeth discoloration nor any unpleasant taste
- Offered antiplaque , antibacterial & antiprotease activity
- Showed significant clinical Improvement in Plaque Index & Gingival Index
- Exhibited anti-caries effect by virtue of *Terminalia chebula* & *Quercus infectoria*

This study thus confirms "GUM TONE GEL & POWDER" as an effective herbal formulation in the treatment of GINGIVITIS.