

GINGIVAL ENLARGEMENT SECONDARY TO DIPHENYLHYDANTOIN THERAPY—A PREVENTION ORIENTED STUDY. THE EFFECT OF CHLORHEXIDINE ACETATE

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Our earlier study has shown, a positive relationship between poor oral hygiene and gingival enlargement in patients who are under Diphenylhydantoin (DPH) therapy.

The present study was undertaken in order to assess the possibility of using Chlorhexidine acetate (CHX) a well known antiplaque agent, in controlling gingival enlargement, seen in these patients.

A double blind clinical trial, using 0.2% CHX and a placebo mouthrinse, was carried out in a group of 36% patients. The group consisted of patients who were under DPH for a period of more than three months and others with a period of less than three months. The earlier group showed established gingival enlargement, while the later group did not show gingival enlargement or showed minimum amount of enlargement.

The Plaque Index, the Gingival Index, and the Gingival Hyperplasia Index was scored for each tooth at the beginning of the study. The subjects were advised to use their respective mouthrinse, 10 ml. twice daily morning and at night. They were recalled to the Dental School once every two weeks for 5 months, where the above scorings were repeated.

The following conclusions could be drawn from the results obtained : (i) CHX (0.2%) could be used effectively ($p=5\%$) in improving the oral hygiene status of patients under DPH therapy and is also effective in minimizing the degree of gingival inflammation, particularly in patients with low grade of gingival enlargement ; (ii) CHX (0.2%) could be used effectively ($p=5\%$) in controlling the development of gingival enlargement, if it is employed as a mouthrinse from the time of commencement of DPH therapy in these subjects ; (iii) CHX (0.2%) does not show a significant effect ($p=5\%$) in controlling established gingival enlargement seen in these subjects.