

# Clinical effect of *Lactobacillus reuteri* in the treatment of gingivitis: a randomized controlled clinical trial

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Efectos clínicos de *Lactobacillus reuteri* en el tratamiento de la gingivitis: ensayo clínico aleatorizado controlado. [Clinical effect of *Lactobacillus reuteri* in the treatment of gingivitis: a randomized controlled clinical trial]. Rev Clin Periodoncia Implantol Rehabil Oral. 11(1):32-35. doi: 10.4067/S0719-01072018000100032.

## Demonstrates that L. reuteri Protectis significantly reduces the number of sites with severe inflammation

#### **RESULTS**

- Both groups had significant improvements in gingival index (primary outcome), plaque index and bleeding on probing.
- Only the L. reuteri Prodentis group had a significant reduction in number of sites with severe inflammation.

#### Number of sites with severe inflammation



#### **CONCLUSION**

• Supplementation with *L. reuteri* Prodentis in the treatment of gingivitis significantly reduces the number of sites with severe inflammation.

### **FACTS**

- Study design: Randomized, double-blind and placebo-controlled
- Subjects: 30 subjects with gingivitis
- Dosage: One lozenge per day (2x10<sup>8</sup> CFU/day)
- Duration: 3 months
- Primary outcome: gingival index
- Secondary outcomes: plaque index, bleeding on probing

#### **FURTHER READING**

- Schlagenhauf U et al. (2020) Consumption of Lactobacillus reuteri-containing lozenges improves periodontal health in navy sailors at sea: a randomized controlled trial [published online ahead of print, 2020 Feb 4]. J Periodontol. 2020;10.1002/JPER.19-0393. doi:10.1002/JPER.19-0393.
- Schlagenhauf U et al. (2016) Regular consumption of *Lactobacillus reuteri*-containing lozenges reduces pregnancy gingivitis: an RCT. J Clin Periodontol. 43:948–954. doi: 10.1111/jcpe.12606.
- Iniesta M et al. (2012) Probiotic effects of orally administered Lactobacillus reuteri-containing tablets on the subgingival and salivary microbiota in patients with gingivitis. A randomized clinical trial. J Clin Periodontol. 39: 736–744.

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