Comparing Acidity and Dental-hypersensitivity between Arginine Mouthrinse and SDF

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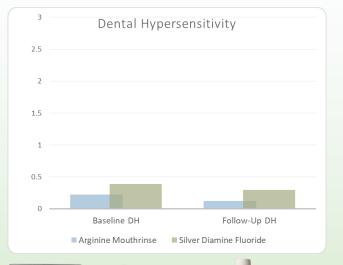
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Backgrou

→ Silver diamin which is alkalin pH.¹ Arginine a catabolism thr

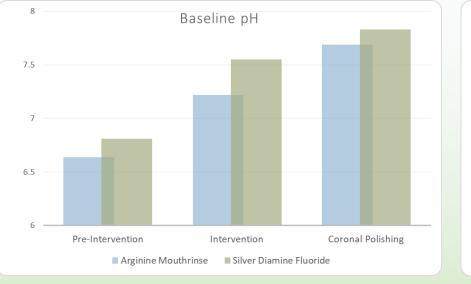
→ The literature SDF can reduce sealing dentina studies have di

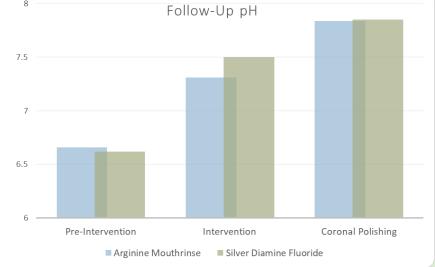
→ The aim of th trial was to cor Arginine was h reduction in DI



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ound	Methods	Results	Discussion
nine fluoride (SDF) contains ammonia, line and can increase the oral cavity's e also produces ammonia after brough the argining doimingso system 2	 → Pediatric patients with no active carious lesions were recruited from a NYC hospital in 2024. ⇒ pH litmus paper string were utilized to measure 	 → Thirty-six patients ranging in age from 4 to 10 years old (<i>M</i> = 6.44, <i>SD</i> = 1.84) were enrolled and 33 were assessed at follow-up. Follow up visits ranged from 14 to 36 days (<i>M</i> = 22.45, <i>SD</i> = 5.26). 	 → Partially consistent with hypotheses, findings support both SDF and arginine as effective in increasing oral pH, but not in reducing DH.
hrough the arginine deiminase system. ² ure has also shown that both arginine and uce dental-hypersensitivity (DH) through inal tubules. ³ However, no empirical directly compared SDF to arginine.	 → pH litmus paper strips were utilized to measure pH three times at baseline visit: after exposure to tap water "Pre-Intervention pH", after exposure to SDF or arginine "Intervention pH", and finally after Coronal Polishing. This was replicated at the follow- up visit. 	* There were significant within-visit increases in oral pH relative to baseline in both groups ($Ps <001$) and further increments after coronal polishing ($Ps <001$).	 → As such, an over-the-counter arginine mouthrinse may be a more accessible – and similarly effective – alternative to SDF to lower oral pH levels and caries risk.
this two-arm, parallel-group, pragmatic compare the effects of arginine and SDF. s hypothesized to have a greater DH and a lesser pH increase than SDF.	→ DH was tested by spraying air across each dental arch. Alternate allocation was used to assign patients to either the arginine (0.8% arginine mouth rinse) or SDF (38% silver fluoride solution) group.	→ There were no significant differences in pH when comparing SDF to arginine group. There were no significant differences in DH within nor across groups.	→ Coronal polishing demonstrated potentially synergistic effects. This can be justified by the multifactorial etiology of caries; reduction of dental plaque may have the greatest effect on oral pH.





References

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3. Arvanitidou, L et al. (2013). Efficacy of a mouthwash containing 0.8% arginine, PVM/MA copolymer, pyrophosphates, and 0.05% sodium fluoride compared to a commercial mouthwash containing 2.4% potassium nitrate and 0.022% sodium fluoride and a control mouthwash containing 0.05% sodium fluoride on dentine hypersensitivity: A six-week randomized clinical study. Journal of Dentistry, 41(1): S34-S41.