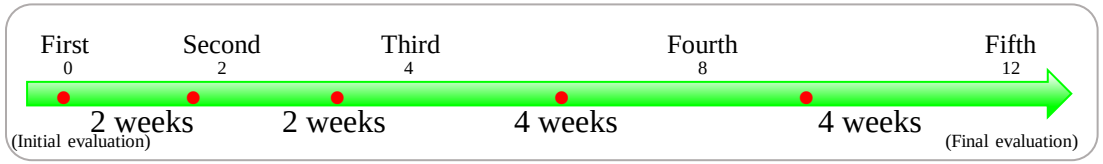
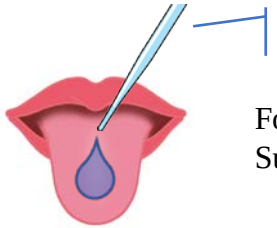
Tobacco control for oral health

Rumi Tano

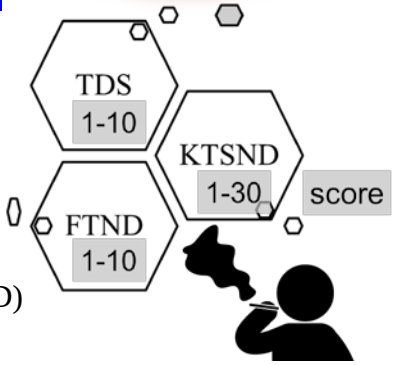




Taste【Sweet(sucrose)/Salty(Nacl)】 1ml

For the subjective evaluation, nicotine dependency was Surveyed by using a self-administered questionnaire.

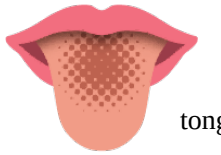
- Tobacco Dependence Screener (TDS)
- Fagerström Test for Nicotine Dependence (FTND)
- Kano Test for Social Nicotine Dependence (KTSND)



[OralChroma, Nissha FIS]

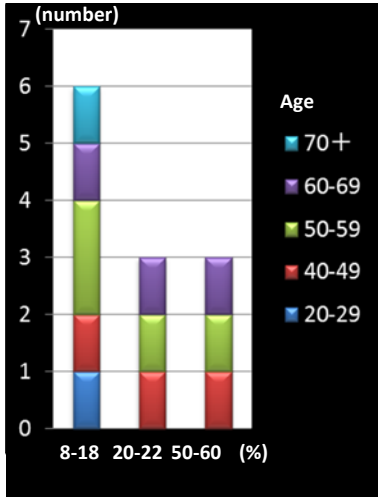
Objective evaluations

- Tongue coating score by visual inspection (range of tongue coating adhesion)
- Taste threshold by the tongue drop method (sweet / salty)
- Level of volatile sulfur compounds in breath by halitosis meter
- Salivary pH by pH meter



tongue coating

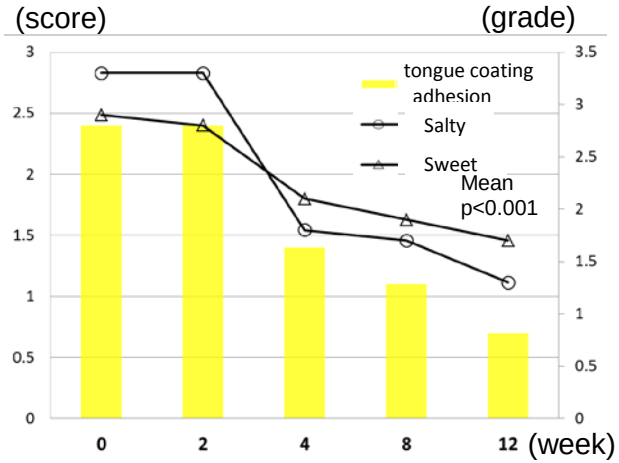
pH meter
[LAQUA twin,HORIBA]



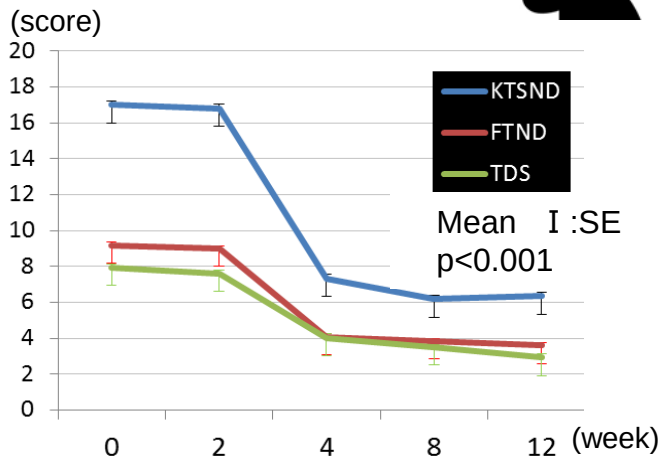
Number of patients by rate of decrease in the number of cigarettes smoked

Trends in mouth odor and salivary pH

Week		0	2	4	8	12
Mouth odor (ppb)	H_2S	277.3	262.9	243.3	165.7	155.1
	CH_3SH	47.3	45.8	44.6	27.5	24.7
	$(CH_3)_2S$	31.4	30.0	29.3	16.9	15.5
Salivary pH		5.38	5.46	5.53	6. 02	6.25



Trends in range of tongue coating adhesion and taste threshold



Trends in nicotine dependency

While no patients managed to quit smoking during the 12 weeks of dental support, an improvement in the evaluation of intraoral environment was seen from 4 weeks of treatment onwards. This suggested that unlike general medical treatment to quit smoking, dental support to quit smoking takes time for non-smoking to be achieved and for effects to manifest. Furthermore, after 4 weeks of support to quit smoking, subjective evaluations showed positive changes in nicotine dependency and taste, while visual evaluations showed positive changes in the state of tongue coating. Moreover, after 8 weeks, significant improvements were seen in measurement items for mouth odor and saliva. The present study demonstrates the need to verify a more effective approach for support to quit smoking that focuses on the duration and methods of support.

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