Research Paper

Free Radicals in various dental diseases and effect of vitamin C

supplementation on it

Smita Sharma¹*, Sanjeev Kumar², Ramakant Dixit³, Veena Singh Ghalaut¹, Pooja Rani⁴

1. Department of Biochemistry, PGIMS, Rohtak, India

2 Government Medical College, Tanda, India

3. Department of Respiratory Medicine, Government Medical College, Ajmer, Rajastan India

4. Department of Oral Surgery, Himachal Dental College, Sundernagar, India

ABSTRACT:

Free radical induced lipid peroxidation has been implicated in pathogenesis of several disorders. Lipid peroxidation product malonaldehyde (MDA) was analyzed before and after vitamin C supplementation (500 mg single dose daily for 6 weeks) in 25 patients of leukoplakia, 47 patients of oral submucous fibrosis, 21 patients of candidiasis, 67 patients of dental caries, 62 patients of oral cancer and 50 healthy controls. Significantly elevated levels of MDA were observed in leukoplakia, oral submucous fibrosis, and cancer as compared to controls (p<0.05). After six weeks of vitamin C supplementation MDA levels decreased in patients of candidiasis and dental caries but in leukoplakia, oral submucous fibrosis and cancer not much change was observed. These findings indicate a role of free radicals in their pathogenesis.

KEYWORDS: Oral disease, MDA level, Lipid peroxidation products, Vitamin C.

INTRODUCTION:

Free radicals can be defined as molecules or molecular fragments with an unpaired which certain electron imparts characteristics to the free radicals such as reactivity [1]. Reactive free radicals are able to produce chemical modifications to damage proteins, lipids, and carbohydrates, and nucleotides in the tissues [2]. It is known that free radicals are probably mediators for tissue damage

in neoplastic diseases [3]. Reactive free radicals may damage cells by initiation of lipid peroxidation that causes profound alteration in the structural integrity and functions of cell membrane [2]. Free radical induced lipid peroxidation has been implicated in the pathogenesis of several disorders including cancer. The concentration of lipid peroxidation product Malonaldehyde (MDA) is most widely used [4,5]. Saliva is a diagnostic sample

www.earthjournals.org

INTERNATIONAL JOURNAL OF PHARMACOLOGY AND THERAPEUTICS ISSN 2249 – 6467

for many oral and systemic diseases [6]. In this study, role of free radicals (salivary MDA) in dental conditions such as oral submucous fibrosis, candidiasis, dental caries, leukoplakia and oral cancer has been explored. Effect of vitamin C supplementation on salivary MDA levels was also explored.

MATERIALS AND METHODS

Subjects: 25 patients (M:F, 13:12) of leukoplakia, 47 (M:F, 16:21) of oral submucous fibrosis, 62 (M:F, 8:4) of oral cancer, 67 (M:F 31:36) of dental caries and 21 patients (M:F, 11:10) of candidiasis in age group 15-60 yrs attending Out Patient Dept. of Govt. Dental College associated with Pt. Bhagwat Dayal Sharma Post graduate Institute of Medical Sciences, Rohtak. All diagnostic tests were done for diagnosing particular diseases. 50 (M:F, 25:25) healthy subjects in age group 15-60 yrs were taken as controls. Non-stimulated whole saliva samples were collected and transported over ice. Samples were centrifuged and stored at -20° C. MDA was analysed by Thiobarbituric Acid (TBA) reaction [7].

RESULTS

Elevated salivary MDA levels were observed in patients with dental caries and candidiasis as compared with controls although the difference was not statistically significant $(3.42 \pm 0.22 \text{ (M)}\& 3.36 \pm 1.42 \text{ (F)}, 3.45 \pm 1.39 \text{ (M)} \& 3.29 \pm 1.37 \text{ (F)} \text{ v/s} 3.38 \pm 0.33 \text{ (M)} \& 3.24\pm0.54 \text{ (F)} \text{ ngml}^{-1}$, respectively p>0.05). While significantly high MDA levels were observed in leukoplakia , oral submucous fibrosis and cancer (Table 1 , p<0.05).

After vitamin C supplementation decrease in MDA levels was observed only in patients of dental caries and candidiasis. This decrease was not statistically significant. Not much change was observed in MDA levels in leukoplakia, oral submucous fibrosis and cancer.

DISCUSSION

Lipid peoxidation has been shown to cause a profound alteration in structural integrity and functions of cell membrane. A study in a baby hamster kidney cell line and its polyoma-virus transformed malignant counterpart reported high levels of lipid peroxidation products and low levels of alpha tocopherol in transformed cells suggesting that lipid peroxidation is increased in the precancerous conditions and malignant state [8].

In the present study high MDA levels were observed in leukoplakia, oral submucous fibrosis and cancer as compared to controls (table 1, p < 0.05), indicating a role of free radicals in pathogenesis of precancerous lesions and cancer.

INTERNATIONAL JOURNAL OF PHARMACOLOGY AND THERAPEUTICS ISSN 2249 – 6467

Table 1. Salivary MDA levels of patients with dental caries, candidiasis, leukoplakia,oral submucous fibrosis, oral cancer and controls (Mean +/- SD)

	SEX	SALIVARY MDA LEVELS (ng.ml ⁻¹)	
		Before vitamin C supplementation	After vitamin C supplementation
CONTROLS n = 50	М	3.38 ± 0.33	NO VITAMIN SUPPLEMENTATION DONE
	F	3.24 ± 0.54	
DENTAL CARIES n = 67	М	3.42 ± 0.22	3.39 ± 0.21
	F	3.36 ± 1.42	3.28 ± 1.36
CANDIDIASIS n = 21	М	3.45 ± 1.39	3.37 ± 1.37
	F	3.29 ± 1.37	3.25 ± 1.38
LEUKOPLAKIA n = 25	М	3.92 ± 0.33 *	3.95 ± 0.32
	F	3.97 ± 0.27 *	3.96 ± 0.25
ORAL SUBMUCOUS FIBROSIS n = 47	М	4.15 ± 0.37 *	4.17 ± 0.33
	F	4.07 ± 0.33 *	4.05 ± 0.34
ORAL CANCER n = 62	М	5.23 ± 0.32 *	5.25 ± 0.33
	F	4.97 ± 0.49 *	4.95 ± 0.45

* Significant at the level of p < 0.05

Volume 2 Issue 4 2012

www.earthjournals.org

INTERNATIONAL JOURNAL OF PHARMACOLOGY AND THERAPEUTICS ISSN 2249 – 6467

Elevated MDA levels have been reported in oral leukoplakia and cancer [9,10]. The body contains a number of protective antioxidant mechanisms, whose specific role is to remove harmful oxidants as they form, or to repair damage caused by reactive oxygen species [11].

Recent medical and dental research is geared towards prevention of free radical mediated diseases by using specific antioxidants. Preliminary data indicates protective role of anti-oxidant supplementation in prevention of precancerous lesions [12]. In our study it has been observed that anti-oxidant vitamin C supplementation for six weeks was helpful in patients of dental caries and candidiasis but for leukoplakia, oral submucous fibrosis and oral cancer prolonged supplementation is recommended. Saliva being a non invasive and easy to collect sample, can be used to assess MDA and anti-oxidant status of patient with an oral lesion.

Further studies on larger scale should be performed to clarify the importance and role of anti-oxidant vitamins in oral diseases.

REFERENCES

1.Slater FT: Free radical mechanisms in tissue injury. Biochem. J. 1984:333:1-15.

2.De Zwart LL, Meerman JHN, Commandeur JNM et al: Biomarkers of

Volume 2 Issue 4 2012

free radical damage applications in experimental animals and humans. Free Radic. Biol. and Med. 1999:26:202-26.

3.Haliwell B, Gutteridge JMC. Free radicals in biology and medicine, Oxford University Press Inc. New York. 2002:701-707.

4.Draper HH, Haley M. Malondialdehyde determination as index of lipid peroxidation. Methods Enzymol. 1990:186:421-31.

5. Öztürk LK, Furuncuoglu H, Atala MH, Uluköylü O, Akyüz S and Yarat A. Association between dentaloral health in young adults and salivary glutathione, lipidperoxidation and sialic acid levels and carbonic anhydrase activity. Braz. J. Med. Biol. Res. 2008:41:956-959.

6.Mandel ID. The role of saliva in maintaining oral homeostasis. JADA. 1989:119:298-304.

7.Buege JA, Aust SD. Microsomal lipid peroxidation. Methods Enzymol. 1978:52:302-310.

8.Goldring CE, Rice-Evans CA, Burdon RH. Alpha tocopherol uptake and its influence on cell proliferation and lipid peroxidation in transformed and nontransformed baby hamster kidney cells. Arch. Biochem. Biophys. 1993:303:429.

9.Guven Y, Unur M, Bektas K, Uslu E, Belce A, Demirez E, Can S.

www.earthjournals.org

INTERNATIONAL JOURNAL OF PHARMACOLOGY AND THERAPEUTICS ISSN 2249 – 6467

Salivary malondialdehyde levels in patients with oral leukoplakia. Tur. J. Med. Sci. 2005:35:329-32.

10.Panjamurthy K, Manoharan S, Ramachandran CR. Lipid peroxidation and antioxidant status in patients with periodontitis. Cell Mol. Biol. Lett. 2005:10:255-64.

11.Halliwell B. Antioxidants in human health and disease. Ann. Rev. Nutr. 1996:16:33-50. 12.Moore S, Calder KAC, Miller NJ, Rice-Evans CA. Antioxidant activity of saliva and periodontal disease. Free Radic. Res. 1994:21:417-25.