| | Aayushi | Internation | al Int | erdisciplinary | Research Journal | (AIIRJ) |
|---------|---------|-------------|--------|--------------------------|------------------------|-------------------|
| VOL- VI | ISSUE-X | OCTOBER | 2019 | PEER REVIEW e-JOURNAL | IMPACT FACTOR 5.707 | ISSN 2349-638x |

Evaluation of Antimicrobial Activity of Different Pepsodent and Colgate Toothpastes on Oral Flora of *'Lactobacillus acidophilus'*

Mr. S. V. Mamdapure Maharashtra Udayagiri Mahavidyalaya, Udgir

Abstract:

The objective of this in vitro study is clinical and laboratory evaluation of different Pepsodent and Colgate toothpaste on antimicrobial activity against Lactobacillus acidophilus. The initially antimicrobial activity evaluation was performed by using well diffusion method. Water was used as a control. Well impregnated with the Pepsodent and Colgate toothpaste were placed in Petri dishes containing culture media inoculated suspension of Lactobacillus acidophilus by the pour plate method. The diameter of the zone of inhibition were measured in centimetre and recorded after 24 hours incubation at 37°C for each Pepsodent and Colgate toothpaste and result were obtained. The antimicrobial activity of Pepsodent triple protection, Pepsodent expert protection, Colgate maximum cavity protection, Colgate triple action, Colgate total whitening were given better result.

Keywords: Oral, Lactobacillus acidophillus, Pepsodent and Colgate toothpaste, Antimicrobial activity

Introduction:

Oral cavity of human supports life for many different species of microorganisms but bacterial infection happened when these microorganisms permeate into the tissues or in case of lower host immunity. The display of bacterial infection of dental decent is permanently changing and is a measurable reflexing of new evolution of oral flora. Oral diseases are major health problems with dental caries and periodontal diseases among the most important preventable Global infectious diseases. Oral health influences the general quality of life and poor oral health is linked to chronic conditions and systemic diseases. The association between oral diseases and the oral microbiota is well established. Dental caries is one of the most prevalent oral diseases. It is highly prevalent among children and persists to be an health problem worldwide public important (Abdullah et.al, 2008).Practically there is no Geographic area in the world whose in inhabitants do not exhibit any evidence of dental caries. It is observed in both sexes, all races, all socioeconomic classes and all age groups (Prakash et.al., 1999). In this era of globalization, the distribution of dental caries present a varied picture, most of the countries with low caries prevalence are experiencing an unprecedented increase in caries prevalence and severity of dental caries (Dash et al., 2002). On the other hand, a reduction of dental caries incidence and

improvement of gingival health care have been observed in several industrialized countries (Marthaler, 1990 and Kalsbeek and Virrips, 1960). This decline in dental carries was mainly due to the appropriate use of fluorides and preventive oral health measures (W. H. O., World Health No. 1, 1994 and oral health, ICMR Bulletin, 1994). The scenario in India is no different from other developing nations. According to the available literature of 1940 to 1960, the prevalence of dental caries in India showed a varied picture i.e. caries being very high in some areas and low in some areas (Damle and Patel, 1994; Tewari and chawla, 1977; Antia, 1962 and shourie, 1941). In spite of these conflicting reports it has been observed that during 1940 the prevalence of dental caries in India was 55.5% and during 1960 it was reported to be 68% (Simratvir et al., 2009; Mahejabeenet.al., 2006 and oral Health, ICMR Bulletin, 1994).

Proper oral hygiene aims to control the harmful effects and prevent disease transmission. Biofilms are communities of bacteria, or microorganisms, attached to surface in the body.Oral biofilms are more commonly referred to as plaque. Biofilms form almost everywhere bacteria are in the mouth, they naturally form on any stationary surface, namely teeth, gums, and tongue. Oral bacteria work with our immune system to keep our bodies diseases free by fighting disease-producing germs that try to come in through the mouth. Numerous kinds of bacteria grow in the mouth. "They are competing for

| | Aayushi | Internation | nal In | terdisciplinary | Research Journal | (AIIRJ) |
|---------|---------|-------------|--------|-----------------|------------------|-----------|
| VOL- VI | ISSUE-X | OCTOBER | 2019 | PEER REVIEW | IMPACT FACTOR | ISSN |
| | | | | e-JOURNAL | 5,707 | 2349-638x |

food and places to grow" and the many hard surfaces in the mouth provide an ideal place for bacteria and biofilms to grow and reproduce. Unlike most other places in or on the body, the mouth does not desquamate (shed). A tooth's distinct surface and stagnant nature makes it optimal for populations and growth of microorganisms and bacteria resulting in dental plaque. To grow and flourish in the mouth, biofilms go through four main stages of growth; first bacteria must be deposited from saliva onto a surface where it can attach. Then the bacteria, or microorganism, grow and replicate. Each day numerous bacteria grow in a person's mouth. Many diseases are related to oral bacteria. Proper oral care and habits often protect against and reduce the effects of some harmful bacteria because of the amount of bacteria in each person's mouth; there is a transfer of bacteria through saliva when lip balm, drinks, toothbrushes, or anything else is shared. Said bacteria transfer can lead to human illness. Some of these diseases that result are relative inconsequential while others could potentially have a serious impact on one's life. Although disease is possible through oral interactions, there are many ways to prevent or reduce the risk of infections and disease. Brushing

and flossing teeth regularly are the mouth basic ways to reduce these risks. These two hygiene tips help to get rid of bacteria that try to stick to surfaces in the mouth to form plaque (oral biofilms). Brushing and flossing the teeth disrupts biofilms and their ability to permanently damage the teeth or gums. The less one brushes their teeth, the better chance that bacteria will form plaque, which may potentially causes serious oral health issues. The success of Pepsodent and Colgate toothpaste depends on its ability to remove oral microflora which causes the dental diseases. Pepsodent toothpastes containing sodiummonofluorophosphate, have been widely used in all over the world. The Colgate toothpastes containing sodium fluoride have been widely used in all over the world. So many researchers are working on the efficiency of different toothpastes containing chemicals that are working as antimicrobial agents functions as inhibitory effect against plaque formations (Itthagarum and wei, 1996; fine et. al. 2006). The recent investigation tries to fulfil gap on study of efficiency of various Pepsodent and Colgate toothpastes against oral Flora using standard well diffusion method.

| Table: 1. l | Pepsodent and | Colgate tooth | pastes evaluated | d in the study, th | heir respective | compositions |
|-------------|---------------|----------------------|------------------|--------------------|-----------------|--------------|
| | | 0 | | • • | | 1 |

| Sr. No. | Toothpaste | Composition listed on Packages |
|------------|--------------------------------|--|
| 1 | Pepsodent whitening | Calcium carbonate, water, sorbitol, hydrated silica, sodium lauryl sulphate, potassium nitrate, flavour, cellulose gum, sodium silicate, Benzyl alcohol, sodium saccharin, perlite, sodium monofluorophosphate. |
| 2 | Pepsodent Germi check+ | Calcium carbonate, water, sorbitol, hydrated silica, sodium lauryl sulphate, flavour, sodium monofluorophosphate, cellulose gum, potassium nitrite, Benzyl alcohol, sodium silicate, Triclosan, Sodium saccharin, Cl 45 430, Limonene, Linalool. |
| 3 | Pepsodent clove salt | Calcium carbonate, water, sorbitol, sodium lauryl sulphate, hydrated silicakaolin, flavour, sodium monofluorophosphate, Potassium Nitrate, Benzyl alcohol, sodium chloride, sodium saccharin, Eugenia caryophyllusleaf oil, Cetylpyridinium chloride, Limonene, Cl 74160, Cl 12490, Cl77891. |
| 4 | Pepsodent super salt | Calcium carbonate, water, sorbitol, hydrated silica, sodium lauryl sulphate, Sodium silicate, sodium monofluorophosphate, cellulose gum, Benzyl alcohol, potassium nitrate, sodium saccharin, sodium chloride, CI 74260. |
| 5 | Pepsodent complete care | Sodium chloride (0.2 4%), sorbitol, water, hydrated silica, polyethylene glycol 32, sodium lauryl sulphate, SD alcohol 38- B, flavour, cellulose gum, sodium saccharin, Titanium dioxide. |
| 6 | Pepsodent expert protection | Water, sorbitol, hydrated silica, sodium lauryl sulphate, polyethylene glycol 32, zinc citrate, flavour, cellulose gum, Triclosan, sodium saccharin, sodium fluoride,Cl 74260, Cl 74160. |

Email id's:- aiirjpramod@gmail.com,aayushijournal@gmail.com | Mob.08999250451 website :- www.aiirjournal.com

| VOL- V | I ISSUE-X O | CTOBER 20 | 19 PEER REVIEW e-JOURNAL | IMPACT FACTOR 5.707 | ISSN 2349-638x | | |
|--------|--------------------------------|------------------|---|---|--|--|--|
| _ | | | | | | | |
| 7 | Pepsodent charcoal | white | Aqua, sorbitol, hydrated glycol 32, flavour, cellulos propyl paraben, sodium sac | silica, sodium lauryl sulpha se gum, Trisodium phosphate charin, zinc citrate, sodium cl | nte, poly ethylene e, methyl paraben, nloride, CI 77891. | | |
| 8 | Pepsodent gum care | | Aqua, sorbitol, hydrated glycol 32,Flavour, cellulos Propyl paraben, sodium sa CI 77891. | Aqua, sorbitol, hydrated silica, sodium lauryl sulphate, poly ethylene glycol 32,Flavour, cellulose gum, Trisodium phosphate, methyl paraben, Propyl paraben, sodium saccharin, zinc citrate, triclosan, sodium Fluoride, CI 77891 | | | |
| 9 | Pepsodent triple protection | | Calcium carbonate, water, s sodium monofluorophosph citrate, sodium silicate, sod 74260, glycerol, Limonene | sorbitol, hydrated silica, sodiu ate, flavour, perlite, cellulos dium saccharin, Benzyl alco | im lauryl sulphate, e gum, potassium hol, CI 74160, CI | | |
| 10 | Colgate MaxFresh | 23 | Sodium chloride 0.24 %, glycol, Sodium Lauryl su pyrophosphate, Cocamido cellulose | Sorbitol, Water, Hydrated si lphate, Flavour, Cellulose g propyl Betaine, Sodium s | lica, Polyethylene gum, Tetrasodium saccharin, Methyl | | |
| 11 | Colgate cibaca | | Sodium Monofluorophospl film, Sorbitol, Silica, Sodiu | hate, Sodium carboxymethyl m Beurylsulphate, Flavour | cellulose, White | | |
| 12 | Colgate triple action | L'On the | Sorbitol, Water, Hydrate Polyethylene glycol, Te Betaine, Cellulose gum, S gum, Titanium dioxide, Pig | d silica, Sodium lauryl s etrasodium pyrophosphate, Sodium saccharin, Sodium ment green, Pigment blue | ulphate, Flavour, Cocamidopropyl fluoride, Xanthan | | |
| 13 | Colgate total whiten | ing | Sodium fluoride 0.24%, Sodium lauryl sulphate, Propylene glycol, Carrage PVM/ MA copolymer | Water, Hydrated silica, Gl Flavour, Cellulose gum, S eenan, Sodium saccharin, 7 | ycerine, Sorbitol, odium hydroxide, Fitanium dioxide, | | |
| 14 | Colgate Visible whit | e toothpaste | Silica, Sorbitol, Glycerine Tetra potassium, Pyroph Cocamido propyl betadim saccharin, Sodium fluoride Titanium dioxide in aqueou | e, Polyethylene glycol, Sod osphate, Sodium lauryl s e, Sodium carboxymethyl o e, Xanthan, Sodium hydroxi s base | ium triphosphate, ulphate, Flavour, cellulose, Sodium de, Blue poly 50, | | |
| 15 | Colgate maximum ca | avity protection | Sodium fluoride 0.24%, S glycol, Cellulose gum, Sod Mica, Titanium dioxide | Sorbitol, Water, hydrated si ium lauryl sulphate, Flavour, | lica, Polyethylene Sodium saccharin, | | |
| 16 | Colgate optic white | W | Calcium pyrophosphate, Copolymer, Polyethylene g sulphate, Tetrasodium pyrc saccharin, Phosphoric acid, | Propylene glycol, Poly lycol, Glycerine, Flavour, Py phosphate, Silica, Hydrogen Sucralose, Butylated, Hydros | vethylene glycol, VR, Sodium lauryl peroxide, Sodium kytoluene, Water | | |
| 17 | Colgate Max white | | Sorbitol, Hydrated silica, glycol, Tetrasodium pyro Betaine, Sodium sacc methylcellulose, Limonene | Sodium lauryl sulphate, Arc phosphate, Cellulose gum, harin, Sodium fluoride, | oma, Polyethylene Cocamidopropyl Hydroxypropyl | | |
| 18 | Colgate cavity protect | ction | Sodium monofluorophospi Water, Glycerine, Sodium Tetrasodium, Pyrophosphat | hate 0.76%, Calcium phos n lauryl sulphate, Cellulose e, Sodium saccharin | phate, Dehydrate, e gum, Favour, | | |
| 19 | Colgate total advanc | ed health | Water, Hydrated silica, Gly lauryl sulphate, Flavour, glycol, Carrageenan, Sodiu | cerine, Sorbitol, PVM/MA c Cellulose gum, Sodium hyd m saccharin, Titanium | opolymer, Sodium roxide, Propylene | | |

Aayushi International Interdisciplinary Research Journal (AIIRJ)

Materials and Methods:

over the teeth and gum region and were inoculated by streaking the swab on Nutrient agar plates.

Collection of samples: Samples were collected 1 hour after breakfast from the individual by swapping

Email id's:- aiirjpramod@gmail.com,aayushijournal@gmail.com | Mob.08999250451 website :- www.aiirjournal.com

Isolation and identification of bacterial species:

The samples that were collected were streak it on the surface of nutrient agar plate using four quadrant methods and incubated at 37°C for 24 to 48 hours.

Colonies with visually distinguishable morphologies were randomly selected and isolated by directly streaking on nutrient Agar plates and incubated for another 24 hours. These isolated samples were spread onto a number of freshly prepared agar plates and incubated at allow cells to form microbial colony. The above agar plate inoculated by streak method and incubated at 37°C for 24 to 48 hours. After incubation period of 48 hours the colonies were identified by morphology, Gram staining and biochemical reaction.

Morphological identification:

Lactobacillus acidophilus species are creamy white colour,Gram positive, rod shaped, fermentative, organotrophs, non motile, grow readily at low pH values i.e. below pH 5.0 and it has optimum growth temperature is 37°C.Its size range between 0.5 to 0.8 Micron metre.

Biochemical characteristics identification:

Main biochemical index of isolated lactobacillus acidophilus were determined by via the biochemical identifications by Indole production test, Methyl red (MR) test, Voges-Proskaeur (VP) test, Citrate utilisation test, Catalase test, Oxidase test, Urea hydrolysis, Nitrate reduction and triple sugar iron test. Strains cultured overnight at 37°C were inoculated into the biochemical identification tube sterile inoculating loop.Every strain the via inoculating was triplicated. Negative control tubes were void of bacteria results were read within 24 to 48 hours.

| Fable: 2. Biochemical | Characterization of the |
|-----------------------|--------------------------------|
| isolated | organism |

| Sr. No. | Test | Result |
|---------|---------------------|--------|
| 1. | Indol production | - |
| 2. | Methyl red | - |
| 3. | Voges-Proskaeur | - |
| 4. | Citrate Utilization | - |
| 5. | Catalase | - |
| 6. | Oxidase | - |
| 7. | Nitrate Reduction | - |
| 8. | Urea hydrolysis | - |
| 9. | Triple Sugar ion | - |

Result and discussion:

The antimicrobial activity of the Pepsodent and Colgate toothpaste was determined by the well diffusion method using standard diffusion techniques. The results of the present investigation showed that the bio efficiency of Pepsodent triple Pepsodent expert protection, Colgate action. maximum cavity protection, Colgate triple action, Colgate total whitening are highest among all the toothpaste against the test organism. The zone of were average range in Pepsodent inhibition whitening, Pepsodent complete care, Pepsodent charcoal white, Pepsodent Germi check +. The zone of inhibition were less in Pepsodent clove salt, Pepsodent super salt, Pepsodent gum care, Colgate optic white, Colgate Max fresh, Colgate cibaca.

The main objective of the study was to evaluate the antimicrobial efficiency of commercially available toothpaste. Lactobacillus acidophilus was chosen as the test organism on the basis that in the oral cavity, they are almost the predominant colonizers of the oral cavity. Oral diseases seem appear after and imbalance among the indigenous microbiota, leading to the emergence of potentially pathogenic bacteria.

The results obtained in this study suggest differences among the tested dentifrices regarding antimicrobial properties. Each and every test comparing other toothpaste which gives zone of inhibition amongst the oral bacteria especially called *lactobacillus acidophilus*. The reason for this could be attributed to the differences in interactions between the bacteria and different Colgate.

When compared to water and conventional toothpaste, all Pepsodent and Colgate toothpaste containing antimicrobial agents showed antimicrobial activity with significant differences. The addition of antimicrobial agents to conventional toothpaste to increase effectiveness in the control or elimination of microorganisms involved in a wide variety of microbial infections in the human mouth, such as lactobacillus acidophilus the primary etiological agents of dental caries. Thus, the objective of the study was evaluated commercially available Pepsodent and Colgate toothpaste that include the most widely used and most studied antimicrobial agents in the composition. Water was

| | Aayushi | Internation | al Int | erdisciplinary | Research Journal (| (AIIRJ) |
|---------|---------|-------------|--------|--------------------------|------------------------|-------------------|
| VOL- VI | ISSUE-X | OCTOBER | 2019 | PEER REVIEW e-JOURNAL | IMPACT FACTOR 5.707 | ISSN 2349-638x |

used as a control like in other studies to confirm the microbial growth around the well.

Table:3.Zone of Inhibition in differentPepsodent and Colgate toothpaste

| Image: Constraint of the constra | Sr. No. | Name of Colgate toothpaste | Zone of Inhibition (in | |
|--|------------|---------------------------------|---------------------------|----|
| 1.Pepsodent whitening1.62.Pepsodent Germi check+1.53.Pepsodent clove salt1.44.Pepsodent super salt1.45.Pepsodent complete care1.66.Pepsodent expert protection1.8 protection7.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Maximum cavity protection2.915.Colgate optic white2.217.Colgate cavity protection2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | | • | Cm) | |
| 2.Pepsodent Germi check+1.53.Pepsodent clove salt1.44.Pepsodent super salt1.45.Pepsodent complete care1.66.Pepsodent expert1.8protection1.58.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate optic white2.217.Colgate optic white2.418.Colgate total advanced health2.6 | 1. | Pepsodent whitening | 1.6 | |
| 3.Pepsodent clove salt1.44.Pepsodent super salt1.45.Pepsodent complete care1.66.Pepsodent expert protection1.8 motection7.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent triple protection2.0 motection10.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening protection2.714.Colgate Visible white toothpaste2.9 motection15.Colgate optic white toothpaste2.217.Colgate total advanced health2.4 | 2. | Pepsodent Germi check+ | 1.5 | |
| 4.Pepsodent super salt1.45.Pepsodent complete care1.66.Pepsodent expert protection1.87.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent gum care1.49.Pepsodent mriple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening toothpaste2.714.Colgate Maximum cavity protection2.915.Colgate optic white toothpaste2.216.Colgate optic white toothpaste2.418.Colgate covity protection2.619.Colgate total advanced health2.6 | 3. | Pepsodent clove salt | 1.4 | 1 |
| 5.Pepsodent complete care1.66.Pepsodent expert protection1.87.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate optic white protection2.916.Colgate optic white toothpaste2.418.Colgate total advanced health2.6 | 4. | Pepsodent super salt | 1.4 | |
| 6.Pepsodent protectionexpert1.8 protection7.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate cavity protection2.619.Colgate total advanced health2.6 | 5. | Pepsodent complete care | 1.6 | |
| protection7.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening toothpaste2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate cavity protection2.619.Colgate total advanced health2.6 | 6. | Pepsodent expert | 1.8 | |
| 7.Pepsodent charcoal white1.58.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening toothpaste2.714.Colgate Visible white toothpaste2.915.Colgate optic white protection2.216.Colgate optic white toothpaste2.418.Colgate total advanced health2.6 | | protection | | 1 |
| 8.Pepsodent gum care1.49.Pepsodent triple protection2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening toothpaste2.714.Colgate Wisible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate cavity protection2.619.Colgate total advanced health2.6 | 7. | Pepsodent charcoal white | 1.5 | |
| 9.Pepsodent protectiontriple 2.010.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening toothpaste2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white 2.22.217.Colgate cavity protection2.418.Colgate total advanced health2.6 | 8. | Pepsodent gum care | 1.4 | |
| protection10.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate cavity protection2.418.Colgate total advanced health2.6 | 9. | Pepsodent triple | 2.0 | |
| 10.Colgate MaxFresh2.111.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Colgate cavity protection2.418.Colgate total advanced health2.6 | | protection | | |
| 11.Colgate cibaca2.012.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 10. | Colgate Max <mark>F</mark> resh | 2.1 | |
| 12.Colgate triple action2.813.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 11. | Colgate cibaca | 2.0 | |
| 13.Colgate total whitening2.714.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 12. | Colgate triple action | 2.8 | |
| 14.Colgate Visible white toothpaste2.515.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 13. | Colgate total whitening | 2.7 | |
| toothpaste15.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 14. | Colgate Visible white | 2.5 | |
| 15.Colgate maximum cavity protection2.916.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | | toothpaste | | |
| protectionImage: colored system16.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 15. | Colgate maximum cavity | 2.9 | |
| 16.Colgate optic white2.217.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | | protection | | |
| 17.Colgate Max white2.418.Colgate cavity protection2.619.Colgate total advanced health2.6 | 16. | Colgate optic white | 2.2 | |
| 18.Colgate cavity protection2.619.Colgate total advanced2.6health2.6 | 17. | Colgate Max white | 2.4 | |
| 19. Colgate total advanced 2.6 Beauth | 18. | Colgate cavity protection | 2.6 | |
| | 19. | Colgate total advanced health | 2.6 | 34 |

Oral hygiene is the practice of keeping one's mouth clean and free of disease and other problems by regular brushing of the teeth and cleaning between the teeth. It is important that oral hygiene be carried out on a regular basis to enable prevention of dental disease and bad breath. The most common types of dental disease are tooth decay and gum diseases including gingivitis and periodontitis. Toothpaste (dentifrice) with fluoride is an important tool to readily used when tooth brushing. The fluoride in the dentifrice is an important protective factor against caries, and an important supplement needed to remineralize already affected enamel. However, in terms of preventing gum disease, the use of toothpaste does not increase the effectiveness

of the activity with respect to the amount of plaque removed.

References:

- Andiara De Rossi, Danielly Cunha Araujo Ferreira, et. Al., (2014): Antimicrobial Activity of Toothpastes containing natural extracts, Chlorhexidine or Triclosan: Brazilian Dental Journal (2014)25(3):186-190.
- Bibin. G. Anand and R. Mala (2014): Prevalence of oral pathogens in oral cavities, dental implants, fixed bridges among the people in south India: European Journal of Biotechnology and Bioscience 2(2): 35-41.
- 3. Botelho, MA, JGB Filho, LL Correa, S G Fonseca and D Montenegro et.al., (2007): Effect of novel essential oil mouthrinse without alcohol on gingivitis: a double blinded randomized controlled trial, J. Applied oral Science., Vol. 15: pp. 175-180.
- 4. Clarke J K (1924): On the bacterial factor in the etiology of dental caries. Brit J Exp pathol; 141-7.
- 5. Feroz Jenner, U Abdul Jaleel, et. Al., Evaluating the antimicrobial activity of commercially available herbal toothpastes on microorganisms associated with Diabetes Mellitus: The Journal of contemporary Dental practice. 2013; 14(5): 924-929.
- Fine, D H; Furgang, D; Markowitz, K; Sreenivasan, P K.; Klimel, K and De Vizio, W (2006): The antimicrobial effect of a triclosan/copolymer dentrifrice on oral microorganisms in vivo. J Am Dent Assoc; 137(10): 1406-13.
- Gamboa F, Estupinan M, Galindo A (2004):
 Presence of Streptococcus mutans in saliva and its relationship with dental caries: Antimicrobial susceptibility of the isolates. Universitas Scientiarum; Vol. 9(2): pp. 23-7.
 - 8. Itthagarun, A and Wei, S H (1996): Analysis of fluoride ion concentrations and in vitro fluoride uptake from different commercial dentifrices. Int Dent J. 46(4);357-361.
 - Jagan N Rao, K R Subash and K Sandeep Kumar (2012): Role of Phytotherapy in Gingivitis: A Review, Int. J. Of Pharmacology, Vol. 8 (1): pp. 1-5.
 - Manupati Prasanth (2011): Antimicrobial Efficacy of Different Toothpastes and Mouthrinses: An In Vitro Study, Dent Res J (Isfahan). 2011 Spring; 8(2): 85-94
 - McMurry LM, Oethinger M, Levy SB (1998): Triclosan targets lipid synthesis. Nature; 394 (6693):531-2. [Pub Med]

Email id's:- aiirjpramod@gmail.com,aayushijournal@gmail.com | Mob.08999250451 website :- www.aiirjournal.com

| | Aayushi | Internationa | I Inter | disciplinary | Research Journal | (AIIRJ) |
|---------|---------|--------------|---------|--------------|------------------|-----------|
| | TSSUE-Y | OCTOPED | 2010 | PEER REVIEW | IMPACT FACTOR | ISSN |
| VOL- VI | 13306-7 | OCTOBER 2 | 2019 | e-10URNAI | 5 707 | 2340-638v |

- Moran J, Addy M (1988): Determination of minimum inhibitory concentrations of commercial toothpastes using an agar dilution method. Journal of Dentistry. 16 (1): 27-3. 1
- 13. Nader A Masarwa, et. al., The use of probiotics in prevention and treatment of oral diseases: EC Dental Science 17.10 (2018): 1783-1791.
- 14. Pannuti, C M; Mattos, J P; Ranoya, P N; Jesus, A M; Lotufo, R F and Romito, G A (2003): Clinical effect of a herbal dentifrice on the control of plaque and gingivitis: a double-blind study. Pesqui Odontol Bras; 17(4): 314-8.
- 15. Shuichi Tsubura, Yoshie Waki, Tsutomu Tsubura: Probiotic effect of Bacillus subtilis tablets on periodontopathic oral bacteria: Microbiology research 2012; Volume 3: e23.
- 16. Steinberg D, Mor C, Dogan H, Kaufmann D, Rotstein, I (2003): Formation of Streptococcus Mutans biofilm following toothbrushing with regular and whitening toothpastes. American Journal of Dentistry. 16(1): 58-60.

- 17. Sura Ihsan Abed Jabuk, Raflaa S. H. Hussian, Zahraa Altaee (2015): Isolation and identification of bacteria and parasite from teeth caries and periodontal: Article in Advances in Environmental Biology.
- Tsao, T F, M G Newman, Y Y Kwok and A K Horikoshi (1982): Effect of Chinese and Western antimicrobial agents on selected oral bacteria, J. Of Dent. Res., Vol. 61: pp. 1103-1106.
- Yrd. Doc. Dr. Nur Ozdabak et. al., (2012) Identification of aerobic bacterial flora in saliva of subjects who apply to the faculty of dentistry in Ataturk univ. Dis. Hek. Fak. Derg. J. Dent Fac Ataturk uni cilt: 22, sayl: Yil: 2012, sayfa: 26-30.
- Zainab Dakhil Degiam (2010): An In Vitro Antimicrobial Activity of six Commercial Toothpastes, Thi-Qar Medical Journal (TQMJ): Vol. (4) No (4): (127-133).

www aiirjourr