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Some signs the big E may reduce gum disease

Prostaglandins are chemicals that transmit hormone actions at the target-cell level. They are being found to participate in a variety of bodily activities, both in man and in lower animals. Recently Jo Max Goodson of the University of California Dental School obtained evidence suggesting that prostaglandins are involved in periodontal disease. The gums may produce prostaglandins as an inflammatory response to bacteria, Goodson postulated, or attacking bacteria might produce their own prostaglandins. In any event he was anxious to see whether drugs known to inhibit prostaglandins might reverse gum disease (SN: 4/1/72, p. 215).

Goodson now reports preliminary, but promising clinical results with one prostaglandin inhibitor. It is none other than controversial vitamin E (SN: 1/15/72, p. 44). Dutch investigators published evidence three years ago that vitamin E is a weak prostaglandin inhibitor.

Goodson and his coinvestigator, Dennis Bolles, gave 16 patients with gum disease 800 milligrams of vitamin E every day for 21 days. This amount is some 30 times greater than the 25 to 30 mgs. the National Research Council has estimated to be man's normal daily vitamin E requirement. The San Francisco researchers then gave a placebo to 10 other patients with gum disease. They measured the amount of inflammatory fluid around the patients' teeth at the end of 21 days. Inflammatory fluid is a mark of periodontal disease and increases as the disease advances; persons with healthy gums do not have it. They found a significant decrease in the fluid around the teeth of patients who had received vitamin E. Fluid was still detectable around the teeth of persons who had not received vitamin E.

"Although we cannot definitely say that the inflammation reversal we saw was due to prostaglandin synthesis inhibition," says Goodson, "it is certainly consistent with that hypothesis." He also stresses that a reversal in inflammation does not necessarily mean a reversal in gum disease itself, although the two phenomena may well go hand in hand. Goodson and Bolles intend to look into the possibility by undertaking more extensive clinical studies.

They also plan to examine the potential of some more potent prostaglandin inhibitors in reversing inflammation and gum disease. One such drug is aspirin. It inhibits prostaglandins some 10 times better than vitamin E. It and an even more powerful prostaglandin inhibitor, indomethacin, will probably be injected into patients gums. □

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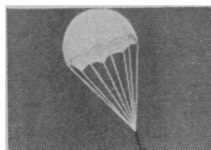
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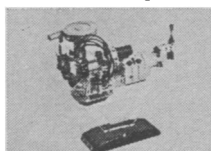
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