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THE EFFECT OF ANTI-ASTHMATIC MEDICATIONS ON ORAL HEALTH AND SALIVA IN A GROUP OF ASTHMATIC CHILDREN

Wahdan M. Abd El-Ghany*; Somaya M. El-Telety**; Tarek EL. Abd El-Galil***;
Gaber M. Yakout**** and Gamal O. Yoness*****

ABSTRACT

This study was conducted in Mansoura city, Dakahlia governorate, Egypt, to evaluate the effect of antiasthmatic medications on oral health status and saliva in a group of asthmatic children. 250 children (200 moderately asthmatic + 50 control) were selected to be the study sample. The asthmatic children were divided into four equal groups according to type of inhaler which had been taken for treatment (Group I = steroid, Group II = beta 2 agonist, Group III = combination of the two inhalers and Group IV = newly diagnosed group). The oral health status of children was recorded using Silness and Loe Plaque Index, CPI, DMFT, DMFS, dmft and dmfs indices. Saliva samples were collected to evaluate the effect of these medication on salivary factors. The results showed significant differences between asthmatic and control children for oral health status and salivary factors. Also, significant differences were found among different groups where beta 2 agonist had the highest harmful effect on oral health and salivary factors followed by the combination of the two inhalers then the steroid inhaler. **Clinical significance:** Special preventive and educational measures will be required to prevent caries and other oral diseases in asthmatic patients.

INTRODUCTION

Asthma is one of the most common chronic medical conditions in childhood, and it has steadily increased during the last two decades⁽¹⁾. The prevalence of asthma in the world displays large variations. The International Study of Asthma and All-

ergies in Childhood shows that the highest rates are found in Australia, Peru, New Zealand, Singapore, and the United Kingdom (UK), whereas the lowest are in Albania and Russia⁽²⁾. However, relatively little is known about the prevalence of allergic disorders in children in North Africa and the Middle East, The prevalence of physician diag-

* Assistant Lecturer, Community Dentistry Department, Faculty of Dentistry, Mansoura University .

** Professor, Community Dentistry Department, Faculty of Dentistry, Mansoura University.

*** Professor, Allergy and Immunology Department, Faculty of Medicine, Mansoura University.

**** Lecturer, Community Dentistry Department, Faculty of Dentistry, Mansoura University.

*****Lecturer, Medical Biochemistry Department, Faculty of Medicine, Mansoura University.