T
t this may seem like a 
strange question, be-
cau se of course, rinse is 
raising awareness to and 
proves oral healthcare must be 
good, right? I mean, who could 
agree with the mass media evi-
dence supporting fluoridated 
toothpastes in reducing caries 
rates, or even the efficacy of anti 
plaque agents such as chlorhexi-
dine in reducing plaque levels? 
Now the manufacturers of many 
of these products are very quick to 
propose their semi-medici-
nal nature, but unlike regulated 
medicines, very little emphasis is 
given to the risks.

'Sufficient evidence'
A literature review by McCul-
lough and Farah (Dental Journal 
of Australia, 2008) concluded that 
there is 'sufficient evidence' that 
'alcohol-containing mouthwash-
es contribute to the increased risk 
with many of the claims made 
by the manufacturers and the 
FDA has warned manufacturers 
such as Walgreen Co Johnson & 
Johnson, and CVS Corp to stop 
making unsupported claims that 
their mouth rinse products can 
reduce plaque above the gum 
line, promote gum health, and 
prevent gum disease. The com-
pared claims are effective in preventing 
gum disease, but according to 
the FDA no such benefit has been 
demonstrated.

On a different note, it is worth 
questioning whether the ter-
mology used by mouthwash 
brands helps or hinders the popula-
their population's ability to maintain 
their own oral hygiene. Consider 
for instance the slogan 'bleeding 
gums are bad'. At first glance this 
seems hard to argue against, but 
if we look at when people actually 
trick their own mouths
m said, it is worth questioning whether the terminology used by mouthwash brands helps or hinders the population's ability to maintain their own oral hygiene.

It is worth questioning whether the terminology used by mouthwash brands helps or hinders the population's ability to maintain their own oral hygiene.

of development of oral cancer'. 
The authors also state that the 
risk of acquiring cancer rises al-
most five times for users of alco-
hol-containing mouthwash who 
neither smoke nor drink, with 
(a higher rate of increase for those 
who do). Whilst this was disputed 
by Yinka Ebo of Cancer Research 
(UK), who concluded that 'there is 
still not enough evidence to sug-
gest that using mouthwash that 
contains alcohol will increase the risk of mouth cancer', many 
brands have now introduced al-
cohol-free ranges. Whilst the risk 
of oral cancer has been much 
debated, concerns have also 
been raised about the effects of 
dryness when using an alcohol 
containing mouthwash and the 
actual effectiveness at combating 
halitosis.

Leaving the content of the 
products aside, what exactly is 
their contribution towards oral 
health? Of course many brands 
heavily promote clinical stud-
ies that clearly point to improve-
ments in gingival health, but 
many of the studies used by the 
mouthwash manufacturers point 
to improvements when looking 
at mouthwashes being used as 
an adjunct to decent oral clean-
ing, but there is very little evi-
dence supporting the use in the 
presence of poor cleaning or as a 
substitute for good oral hygiene. 
Whilst the 'help' that they claim 
to offer to families is heavily ad-
vertised, perhaps mouth washing 
post brushing (hence rinsing of 
fluoridated toothpaste) for a high 
caries risk caries may actually be a 
hindrance.

Child ranges
Many leading manufacturers are 
introducing children's ranges of 
mouthwashes, again with much 
of the same rhetoric around kill-
ing bacteria and carefully worded 
implications surrounding pre-
venting oral health problems. 
Many of the studies used by the 
mouthwash manufacturers point 
to a cost ineffective dependency.

Whilst organisations such as 
the FDA have acted to rep-
rimand companies for making 
false claims, this in itself does 
not prove harm or a causal link 
to those patients to choose to stay 
away from gingival brushing and 
flossing because they mis-
interpret slogans such as 'bleed-
ning gums are bad' or 'cleans the 
whole mouth'. However, this does 
lead me back to the original ques-
tion: are mouthwashes actually a 
help or a hindrance? Of course, in 
some situations they can be very 
useful and many dentists often 
recommend these products with 
good results, but this is marred 
by a plethora of quasi-scientific 
claims which, rather than em-
phasise their limited usefulness, 
imply to many that they are a 
ad- 
equate replacement to decent oral 
cleaning.

About the author
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tist from Bristol University Dental 
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cation in implantology and is currently undertaking the Diploma in Implantol-
ogy at UCCs Eastman Dental Institute.

Product recall of Sensodyne Repair & Protect 
Batch No 031G only
GlaxoSmithKline Consumer Healthcare is taking the precautionary measure to recall Batch No 031G of Sensodyne Repair & Protect, a dentine tubule occluding toothpaste for the treatment of dentine hypersensitivity.

It has come to our attention through consumer reports and now from our own thorough investigations that this batch contains some larger (1 - 2 mm) particles of the occluding material (calcium sodium phosphosilicate – NovaMin™ – normal particle size range typically less than 75 microns). These larger particles are noticeable by the end user. GSK's investigation concluded that these larger particles may scratch the gums when brushing, which may cause the gums to bleed. Therefore GSK will be taking the precautionary measure to recall this batch. Only a very small number of such cases have been reported. Patients have been advised to contact their dentist if they experience bleeding from the gums after using this product.

We regret any inconvenience this may cause.

What you/your patients should do:
• If you/your patient have a pack of Sensodyne Repair & Protect please check to see if it is Batch No 031G
• If you have Batch No 031G please stop using it and return any packs (used or unused) to the following address for a refund:
Consumer Affairs Dept (Sensodyne)
GlaxoSmithKline Consumer Healthcare
Brentford
TW8 9GS
• Please enclose your contact details in the envelope
• If you have any questions please call the freephone number below
• If the batch code is NOT 031G then you do not need to take any action

Freephone helpline: 0800 652 4500
8.30am-6pm Monday to Friday with an answer phone outside of these hours

Consumer health and safety is of upmost importance to GSK.