Experts quarrel over mouthwash

Study in Australian dental journal pushes oral cancer debate

By Daniel Zimmermann, Managing Editor, Dental Tribune International

LEIPZIG, Germany: New evidence from Australia has revealed that the long-term use of mouthwash containing alcohol can lead to an increased risk of developing oral cancer.

The information, which was released after a scientific review was published in the Australian Dental Journal, reports on evidence that ethanol allows carcinogenic substances, such as nicotine, to penetrate the lining of the mouth.

University of Melbourne in Australia, is used to kill the bacteria responsible for tooth decay. It is also necessary as a solvent for different flavor oils.

Professor of Oral Medicine at the University of New South Wales in Sydney in Australia, who led the study said, “We see people with oral cancer who have no other risk factors than the use of mouthwash containing alcohol, so what we’ve done is review all the evidence. Since the article, further evidence has come out, too.”

“We believe there should be warnings. If it was a facial cream that had the effect of reducing acne but had a four- to five-fold increased risk of skin cancer, no-one would be recommending it,” he added.

The Australian government said although the study was “very interesting,” it lacked definite proof that these products would increase the risk of cancer. Ministry of Health dental officer, Robin Whyman, recommended people speak to their dentists when using mouthwash long term.

Speaking to Dental Tribune, a spokesperson for Johnson & Johnson rejected the claims: “Leading cancer scientists, as well as the U.S. Food and Drug Administration and researchers in dentistry, have found no evidence that alcohol-containing mouthwashes, if used properly, lead to increased risk of developing oral cancer.”

The company, which is behind the Listerine brand, holds 25 percent of the global mouthwash market and claims to have conducted more than 100 scientific evaluations of its top-selling brand.

Disagreement over mouthwashes — and what it really means

By Bernhard Steward

Recent media controversy in Australia over the risk of oral cancer associated with the use of alcohol-containing mouthwashes can be seen as one aspect of a pervasive public health issue.

Once an agent has been unequivocally established as carcinogenic to humans, exposure to that agent in any context is likely to be hazardous and therefore should be prevented. Consideration of this principle in relation to alcohol-containing mouthwashes clearly illustrates one aspect of the dilemma. Specifically, in determining public health policy, how much weight should be accorded to the general findings concerning the agent in question in comparison with those findings that relate specifically to the context under consideration?

Causation of cancer from drinking alcoholic beverages is established to the point of certainty. The anatomical sites principally involved are the oral cavity and oropharynx, and risk is increased multiplicatively in smokers.

However, the evidence in relation to the risk of oral cancer associated with mouthwash use is equivocal to the point that sharply differing conclusions may be drawn. Writing in the Australian Dental Journal, McCullough and Farah, arguing from the perspective of alcohol as an established carcinogen, state: “There is now sufficient evidence to accept the proposition that developing oral cancer is increased or contributed to by the use of alcohol-containing mouthwashes.”

This differs from the conclusion by La Vecchia in Oral Oncology: “A link between mouthwash use, specifically alcohol-containing mouthwash, and oral cancer is not supported by epidemiological evidence.” La Vecchia delineates uncertainties regarding mouthwash studies generally, specifically in relation to the lack of clear evidence regarding an anticipated increased risk attributable to alcohol per se.

General agreement that a carcinogenic hazard associated with the use of alcohol-containing mouthwashes is plausible suggests cautionary advice should be given to those making long-term use of these products. However, present uncertainty would not justify warning labels or restricted sales of mouthwashes.

Contact

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