

Xerostomia-Sialagogic Effect **DR. R. Ravichandran***

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Oral parchedness is known to cause several oral disorders, including candidiasis, glossitis, atrophy of the oral mucosa, dysgeusia, and multiple caries. Recent studies have also shown that the number of people suffering from oral dryness in Japan is increasing, both because the number of older people in the population is rising rapidly and because the social milieu is increasingly stressful. The cause of oral dryness is generally believed to be reduced secretion of saliva, and the most important causes of this decrease in saliva production include diminished salivary gland tissue function due to drug side effects damage to salivary gland tissue by radiotherapy, Sjögren's syndrome, diabetes mellitus and aging. In addition, depression may also reduce saliva production and loss of muscle strength in the perioral muscles and central salivary gland damage due to a cerebrovascular disorder may also be present; these may interact in a complex way to produce symptoms. Many studies have reported that oral dryness is common in older people in whom several of these factors are present. Recently, however, it has been noted that not only older people, but an increasing number of younger people is suffering from oral dryness as they become less able to accommodate to the range of emotional changes and changes in their physical environment, becoming overstressed and developing symptoms of depression as a result. Oral dryness is thus now a condition that affects people across generations. Saliva normally contains a range of useful substances, including substances with antimicrobial and wound-healing properties, as well as growth factors and immunoglobulin, and is important for maintaining both oral and general health. Oral dryness, in which these substances are not secreted in sufficient quantity, is thus a problem that dentists may not ignore. Patients with oral dryness should therefore be diagnosed and treated appropriately. However, at this juncture, it is difficult to deal with all the various causes of oral dryness and heal it completely. The use of symptomatic therapy in its treatment is thus comparatively common. Such symptomatic therapies include the use of artificial saliva and moisturizers as well as other procedures such as salivary gland massage. Artificial saliva and moisturizers are used to compensate for the lower amount of saliva secreted. Salivary gland massage is performed with the aim of increasing saliva secretion. A variety of different methods may thus be used in combination to treat patients with oral dryness. These symptomatic therapies are widely used and can generally be said to be effective. However, most such studies

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have described their use in older patients, and most reports of their use in younger patients are limited to statistical studies with few investigations having addressed the pathophysiology of oral dryness and its causes. No conclusions can thus be drawn about the universal efficacy of conventional methods in all age groups. Older people may have difficulties in taking full responsibility for oral dryness self-care, and this naturally increases the burden on family members and caregivers. When considering measures to relieve oral dryness, the development of simple, effective methods that can be used by people of all generations and that are quick and easy to perform is desirable. Oral hydration alone does not necessarily provide adequate oral dryness care, and other multifaceted measures that should also be taken include eliminating underlying factors, providing a variety of stimuli with the aim of restoring the amount of saliva secreted and oral cleaning. However, no method currently integrates all these aspects. The authors have previously developed an agent that is both simple and capable of providing not only hydration, but also total oral dryness care, and they have reported its potential effect. In this study, whether this newly developed oral dryness care agent increased the amount of saliva produced and contributed to moisture retention was investigated in individuals of different generations.