



# probiotika



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DSSO, October 8 2015

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Rank	Condition name	Millions	(%)
1	Untreated caries in permanent teeth	2431	35.3
2	Tension-type headache	1431	20.8
3	Migraine	1012	14.7
4	Fungal skin diseases	985	14.3
5	Other skin and subcutaneous diseases	803	11.7
6	<i>Severe periodontitis</i>	743	10.8
7	Mild hearing loss	724	10.5
8	Acne vulgaris	646	9.4
9	Low back pain	632	9.2
10	Untreated caries in primary teeth	621	8.8
36	<i>Total tooth loss</i>	158	2.3

Kassebaum et al., 2015

# caries is a biofilm-mediated disease



“...result from a complex interaction between the **commensal** microbiota, host susceptibility and environmental factors such as diet.”

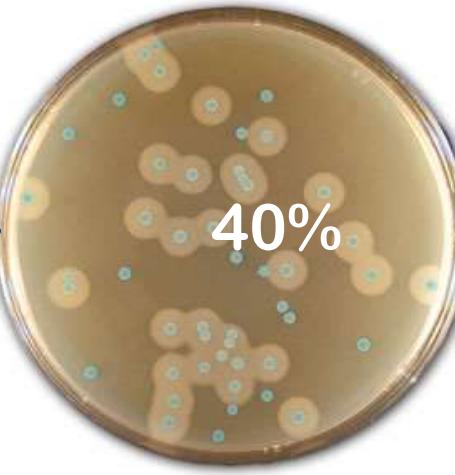
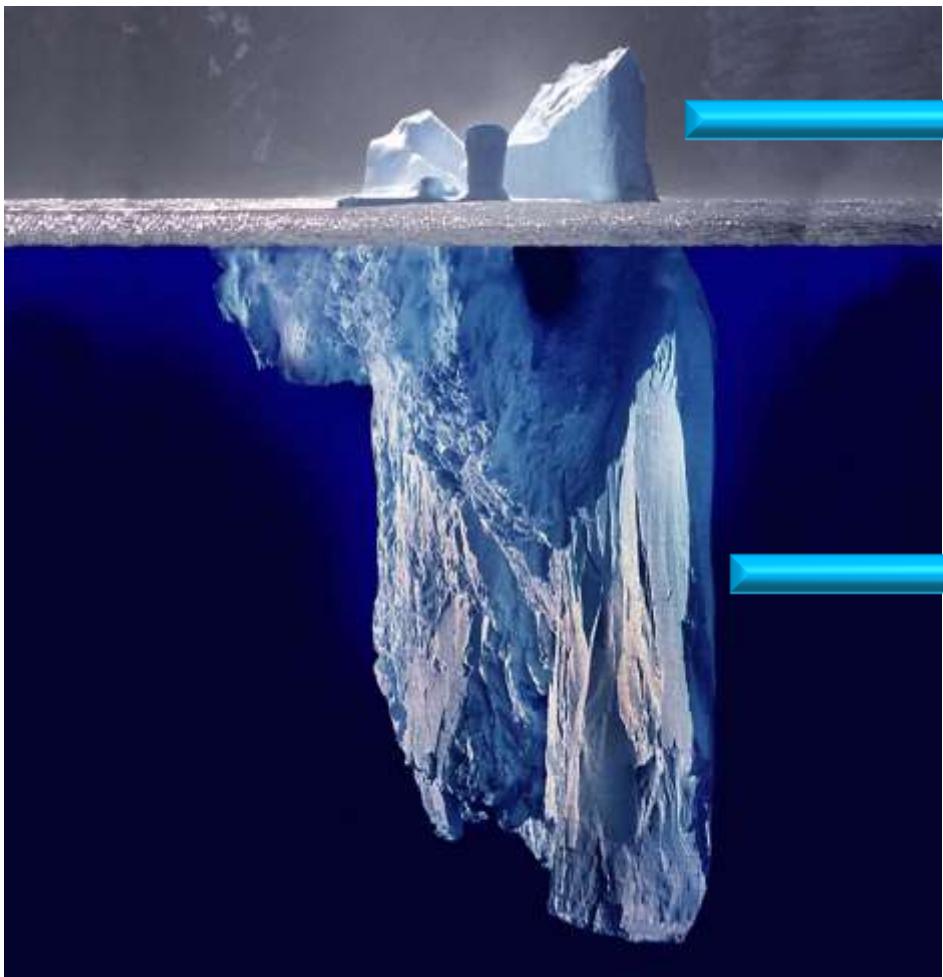
Wade, 2013

a non-communicable disease



an  
important  
role for  
oral health





selective  
non-selective  
aerobic  
anaerobic

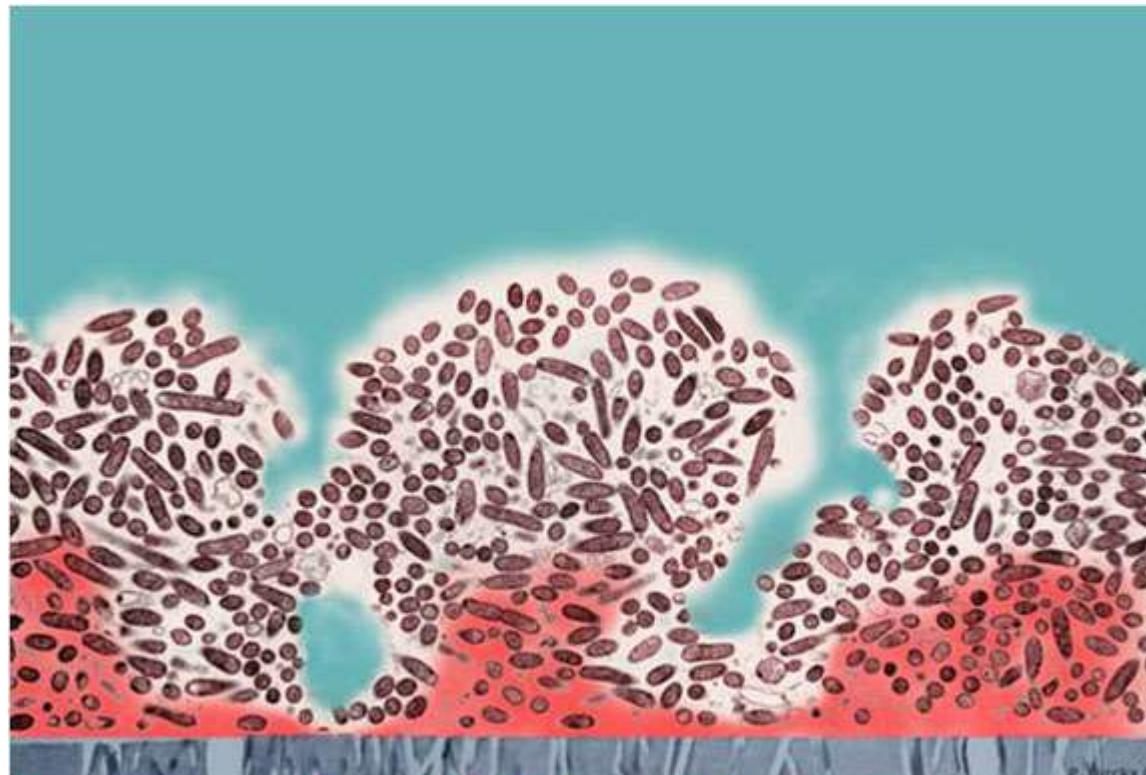


molecular  
methods  
60%



- 16s rRNA, cloning and sequencing
- pyrosequencing
- whole genome sequencing
- PCR
- quantitative PCR
- DNA-DNA hybridization
- microarray

a biofilm is an aggregate or cluster of microorganisms in which cells adhere to each other on a surface that is **protected**

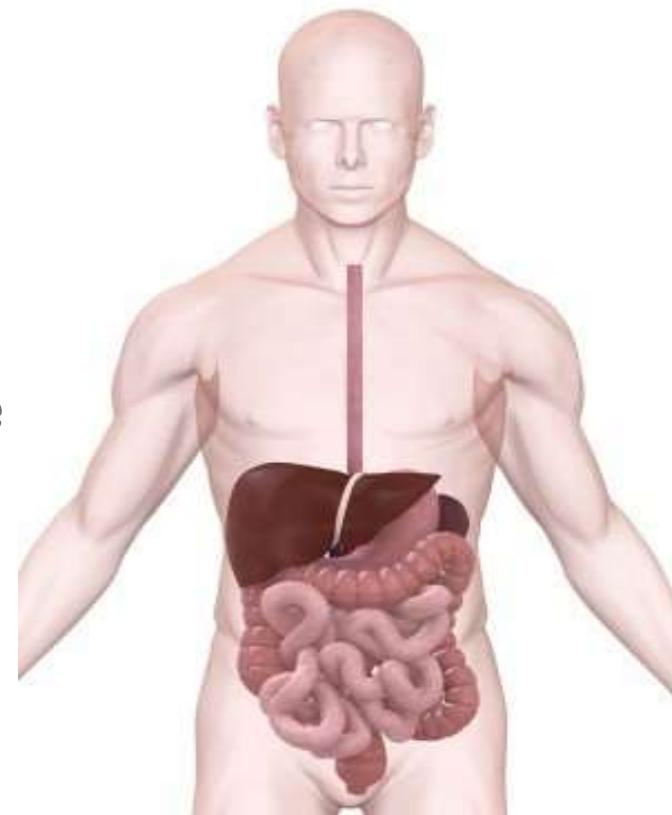


microorganisms in polysaccharide matrix



# a crucial role in health

- break down food
- convert to energy
- excludes bacteria that are harmful
- **80% of our immune response located in the intestines**



# microbial diversity and stability associated with health

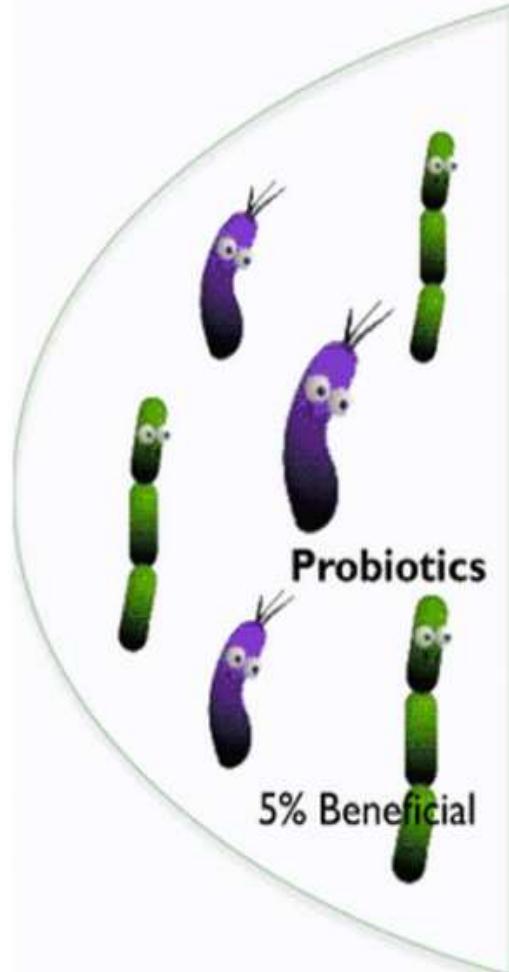


# STRESSED, DESTABILIZED BIOFILM WITH REDUCED DIVERSITY ASSOCIATED WITH DISEASE

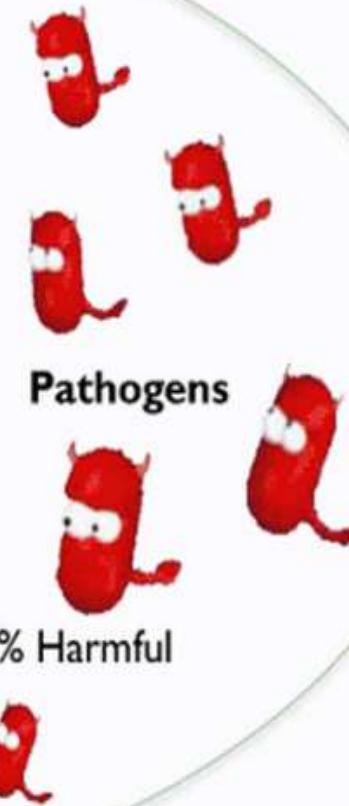


dysbiosis





*"The neutral microbes can be pathogens or beneficial depending on the milieu."*



© 2013 SCD Probiotics • 5

# proposed genera in the core oral microbiome

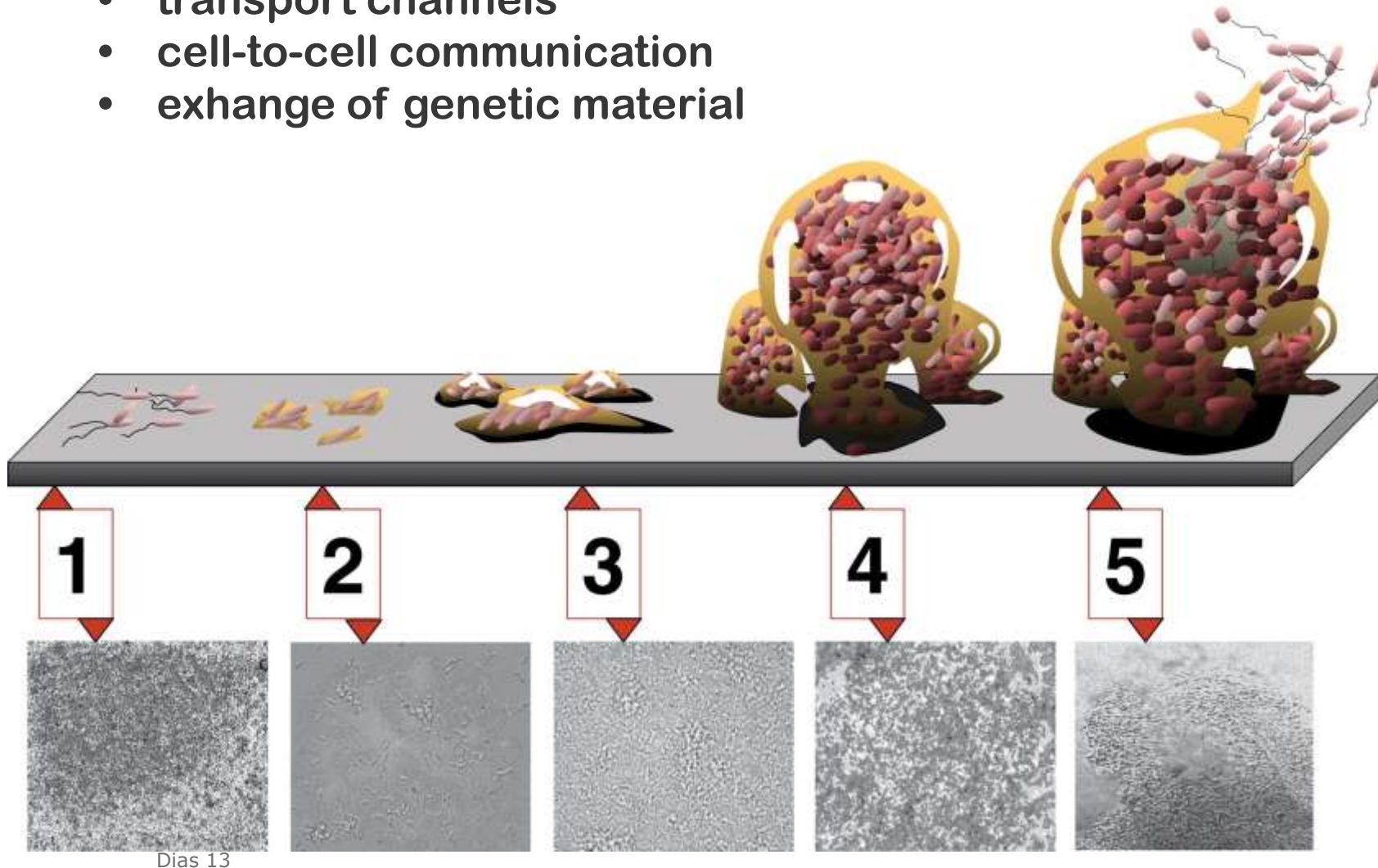
*Streptococcus*  
*Veillonella*  
*Granulicatella*  
*Neisseria*  
*Haemophilus*  
*Corynebacterium*  
*Rothia*  
*Actinomyces*  
*Prevotella*  
*Capnocythophaga*  
*Porphyromonas*  
*Fusobacterium*



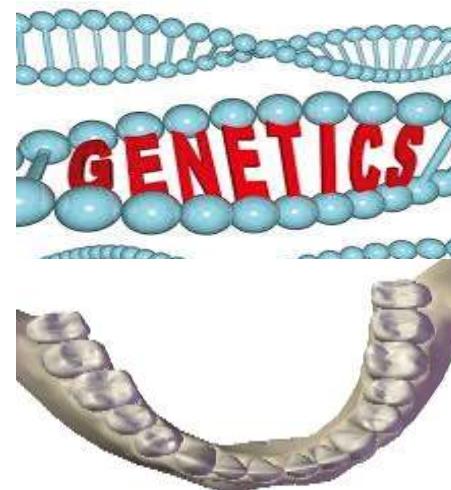
Zaura 2009, Marsh 2015



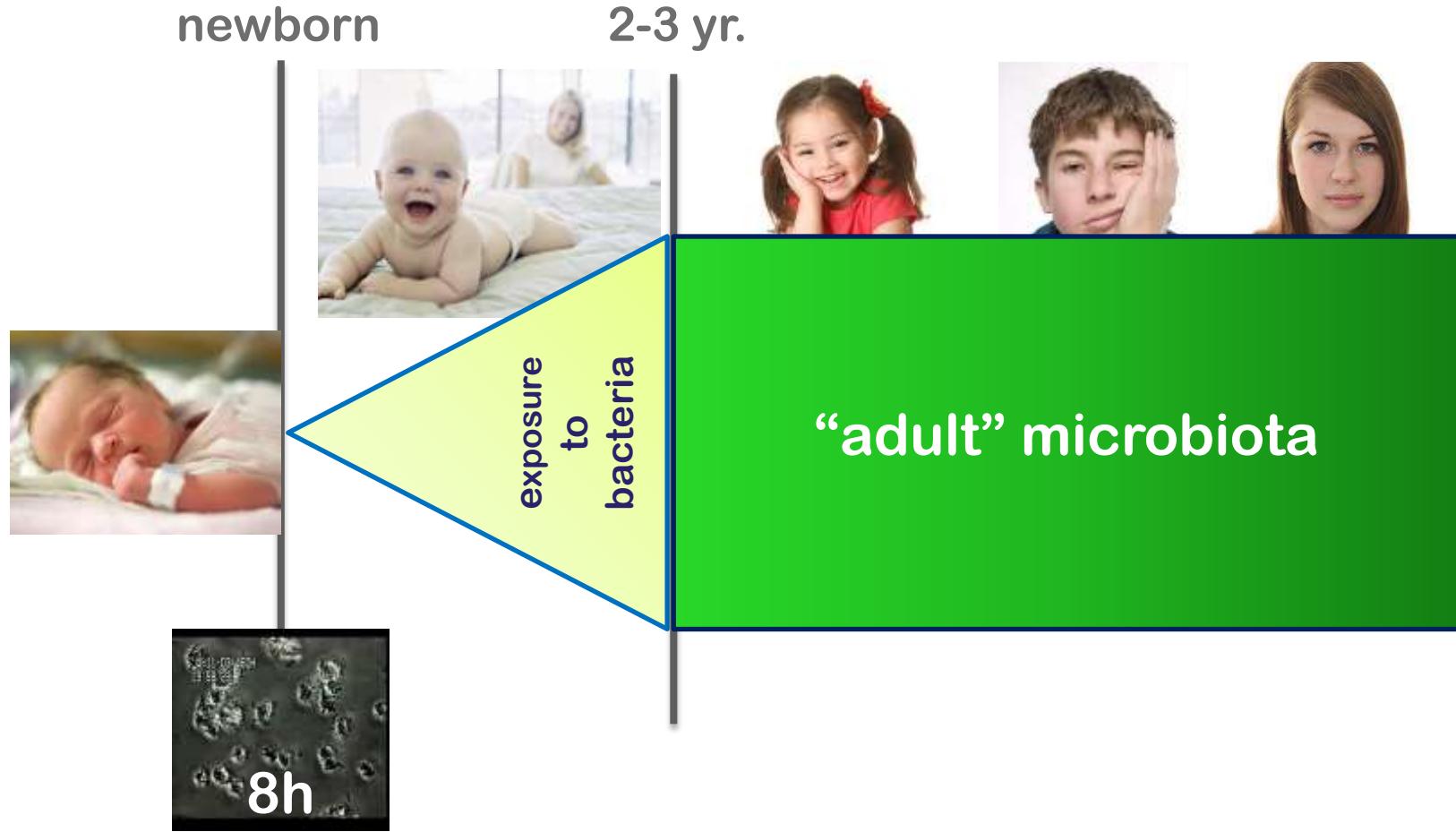
- co-aggregate
- metabolic exchange
- transport channels
- cell-to-cell communication
- exchange of genetic material

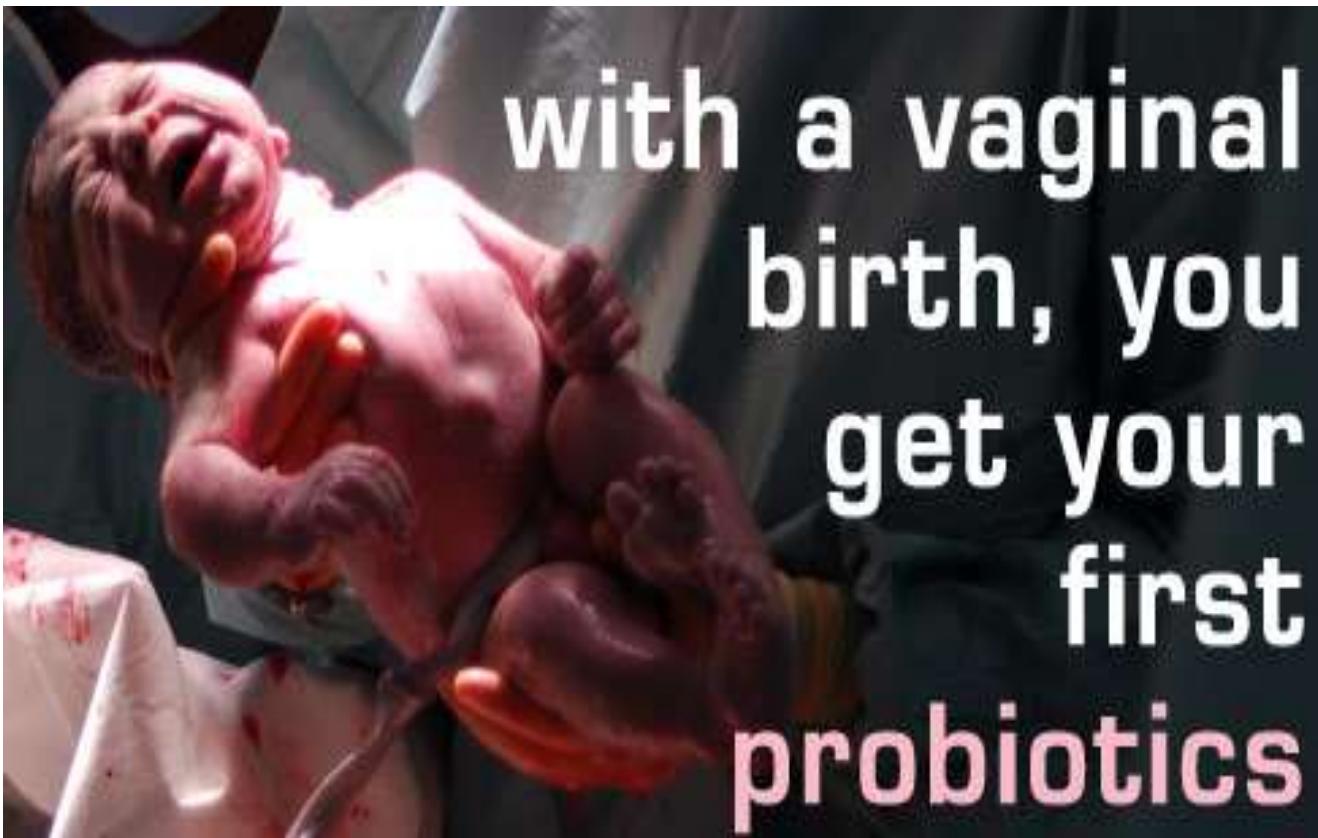


- genetics
- location
- age
- diet
- sexual behavior  
80.000.000 cfu in one kiss



sequence and timing of exposure to microbes  
dictate the composition of the oral biofilm  
**“first come, first served”**





# the microbiota of the mouth differs between 3-month-old breast-fed and formula-fed infants



**lactobacilli 0%**



**lactobacilli 28%**

- more bifidobacteria
- greater diversity

Holgerson et al., 2013 J Pediatr Gastroenterol Nutr



**“the oral microbiota does not play a passive role but actively contributes to the maintenance of health”**

Devine and Marsh, 2009



**“the resident oral microbiota is diverse, natural and beneficial to the host”**

Marsh, 2015

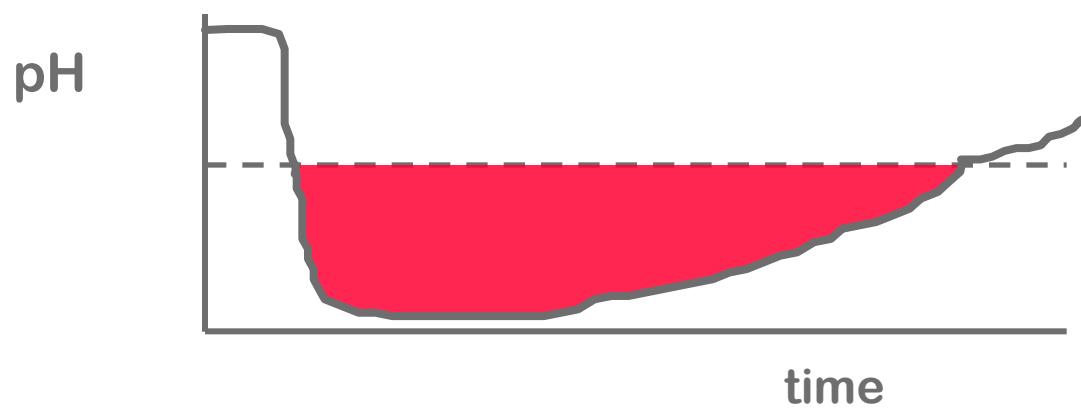
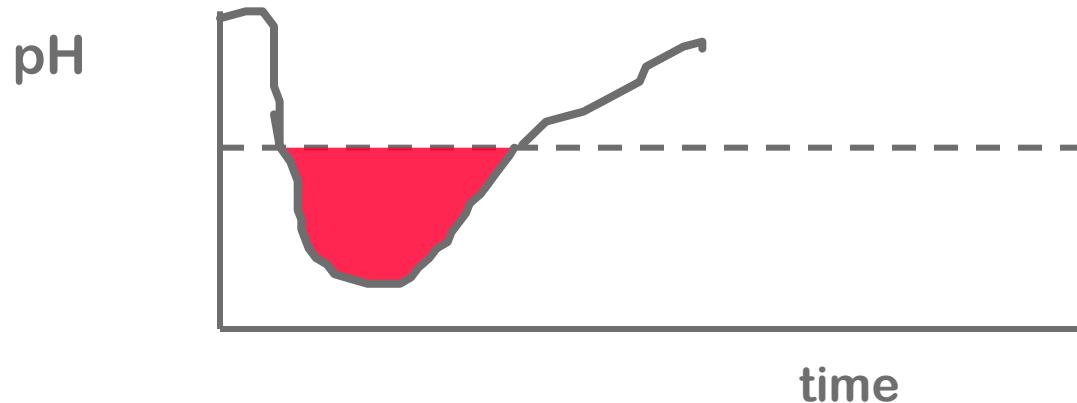


# sucrose in diet is fueling the caries process





## acid-tolerating bacteria

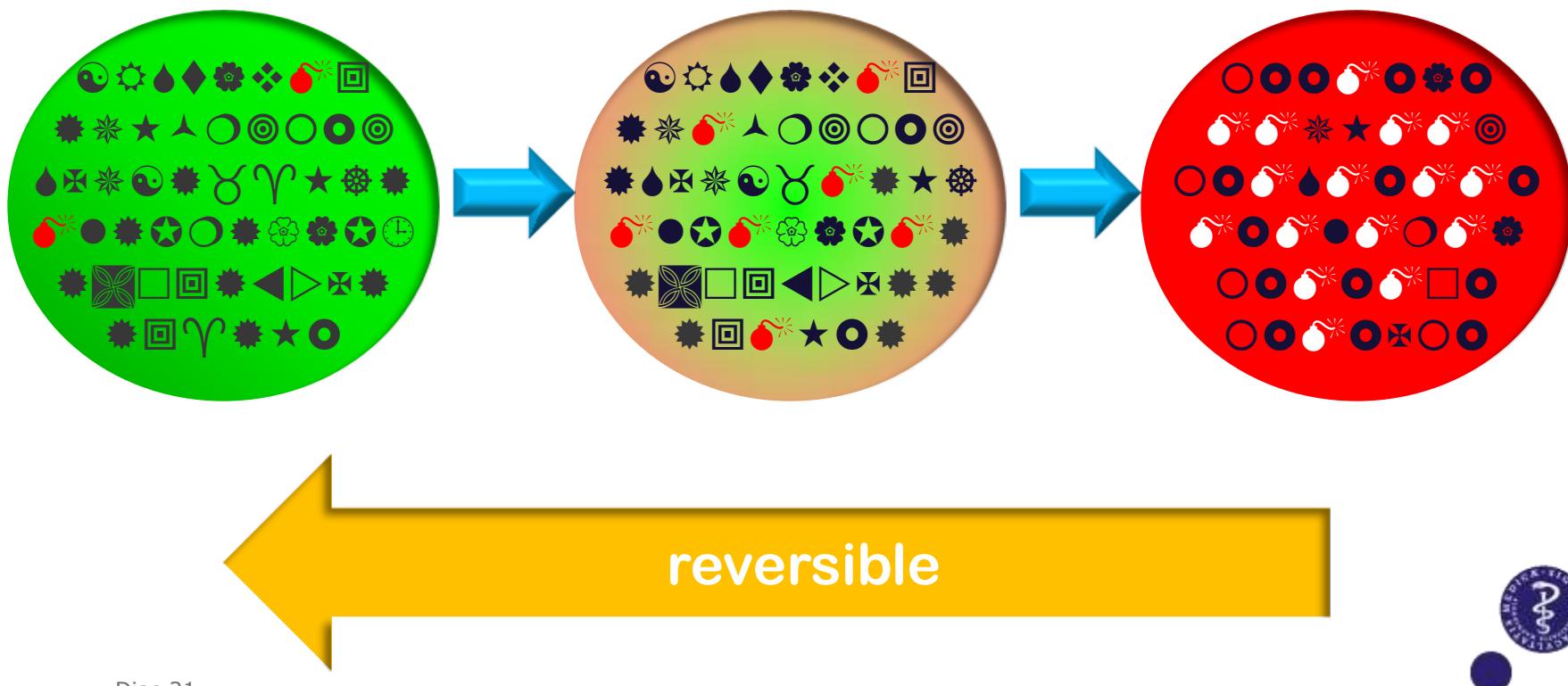


# acid stress leads to microbial shift

stable and diverse

adaptation to low pH

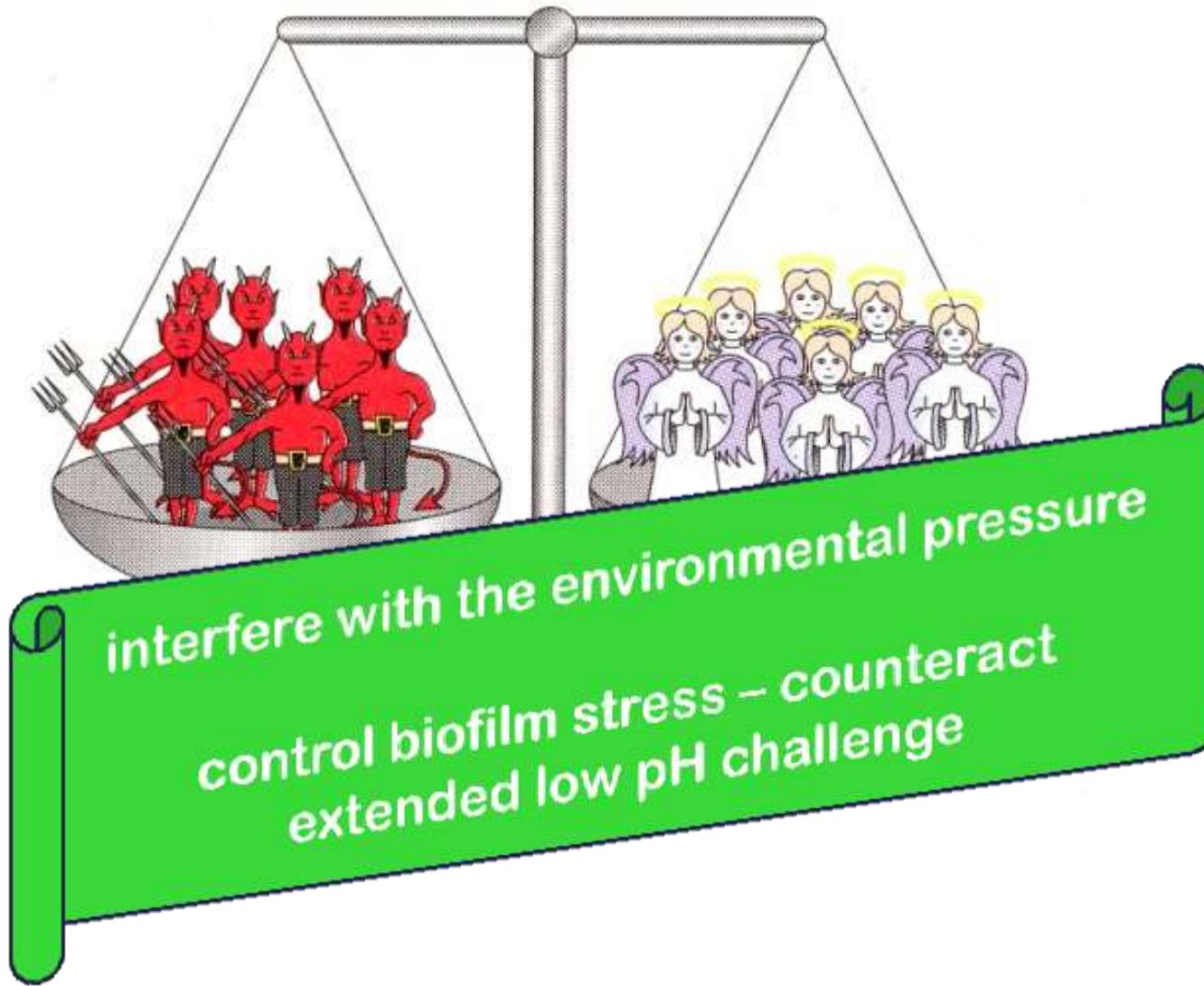
overgrowth of aciduric bacteria,  
reduced diversity



# other examples of biofilm stress

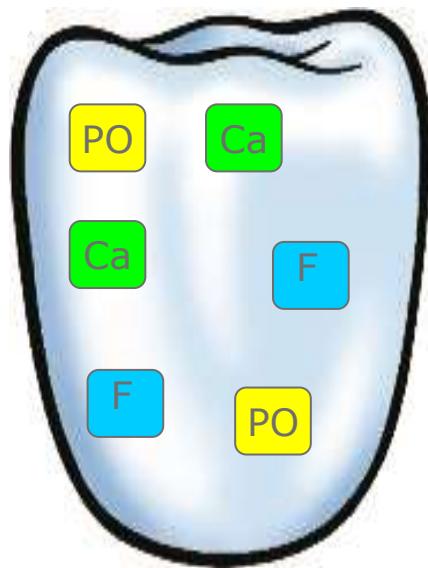
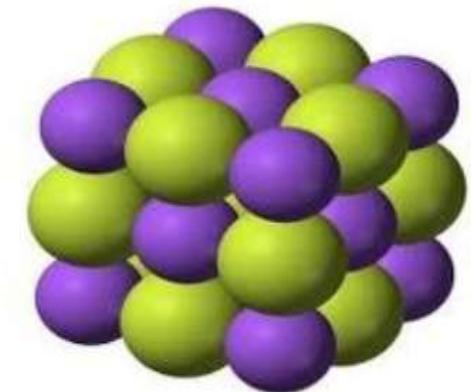


# maintain or restore homeostasis



## 1) inhibition of biofilm acid production

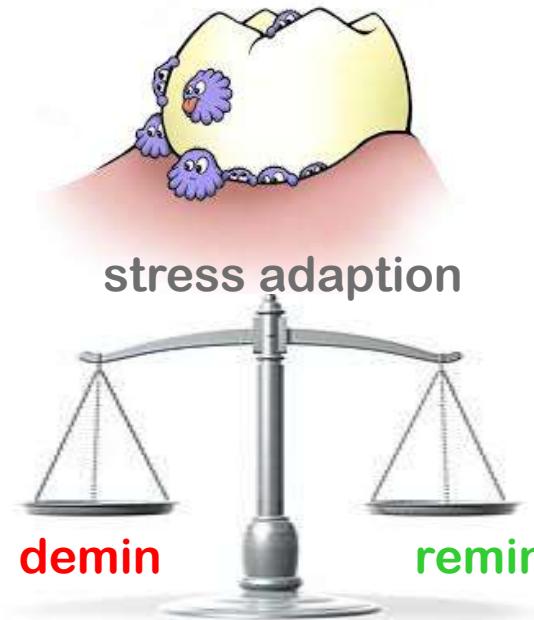
- e.g. fluoride-containing products or metabolic inhibitors (xylitol)



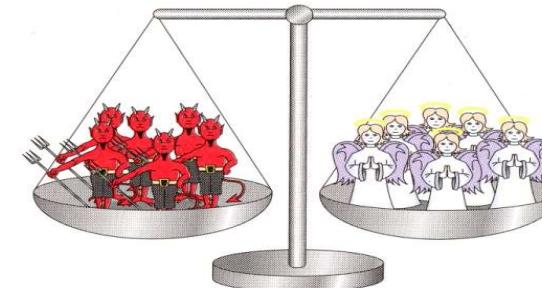
presence low [F] can inhibit the aciduric adaption of the biofilm and lower the critical pH

# fluoride works locally in the biofilm/tooth interspace

in very low concentrations  
e.g. F milk, water F



in low concentrations  
e.g. toothpaste



in high concentrations  
e.g. F-varnish



## 2) mechanical plaque removal



- toothbrush
- flossing
- tooth sticks
- professional tooth cleaning

a "healthy" biofilm



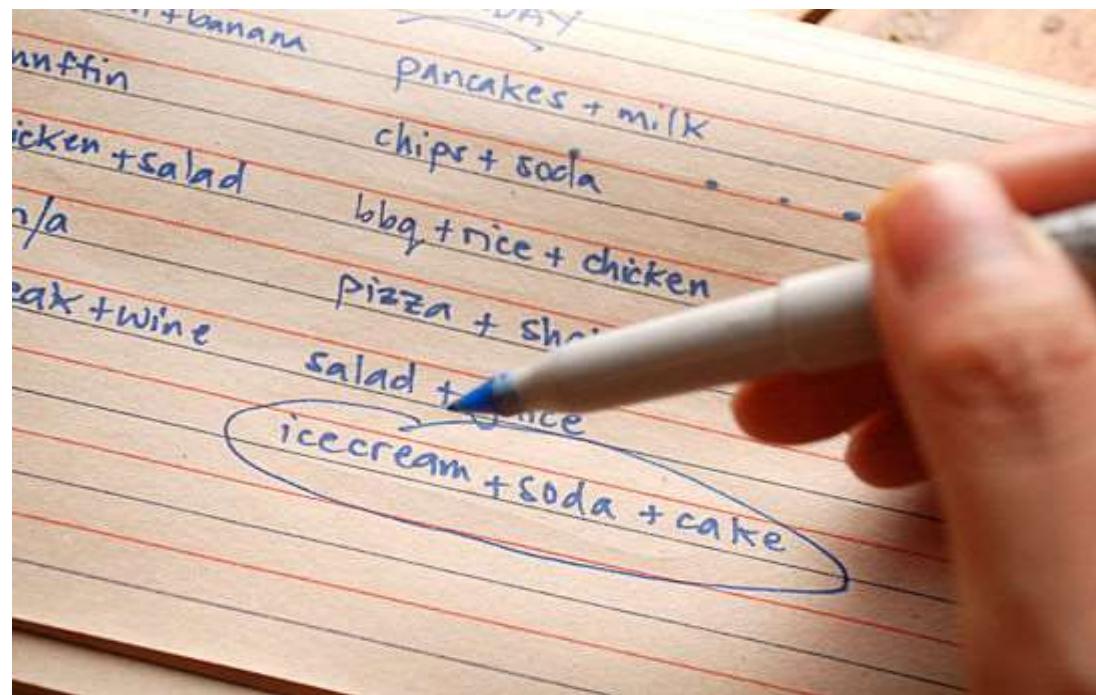
a stressed biofilm



good but not meticulous!

### 3) reduce sugar frequency

- reduction of repeated low-pH conditions





sugar amount =  
obesity/overweight



sugar frequency =  
caries

# Average Sugar Intake Per Day:

1700's an average Englishman had 5g / day  
= just over 1 teaspoon / day

1800's this increased to 22.4g / day  
= 5 ½ teaspoons / day

1900's that jumped to 124g / day  
= 31 teaspoons / day

2000's an average American had  
189g / day = 47 teaspoons / day

**WHO (the World Health Organisation)**

recommend less than 50g / day  
= 12.5 teaspoons / day.

reduce free-sugar  
intake to < 10% E

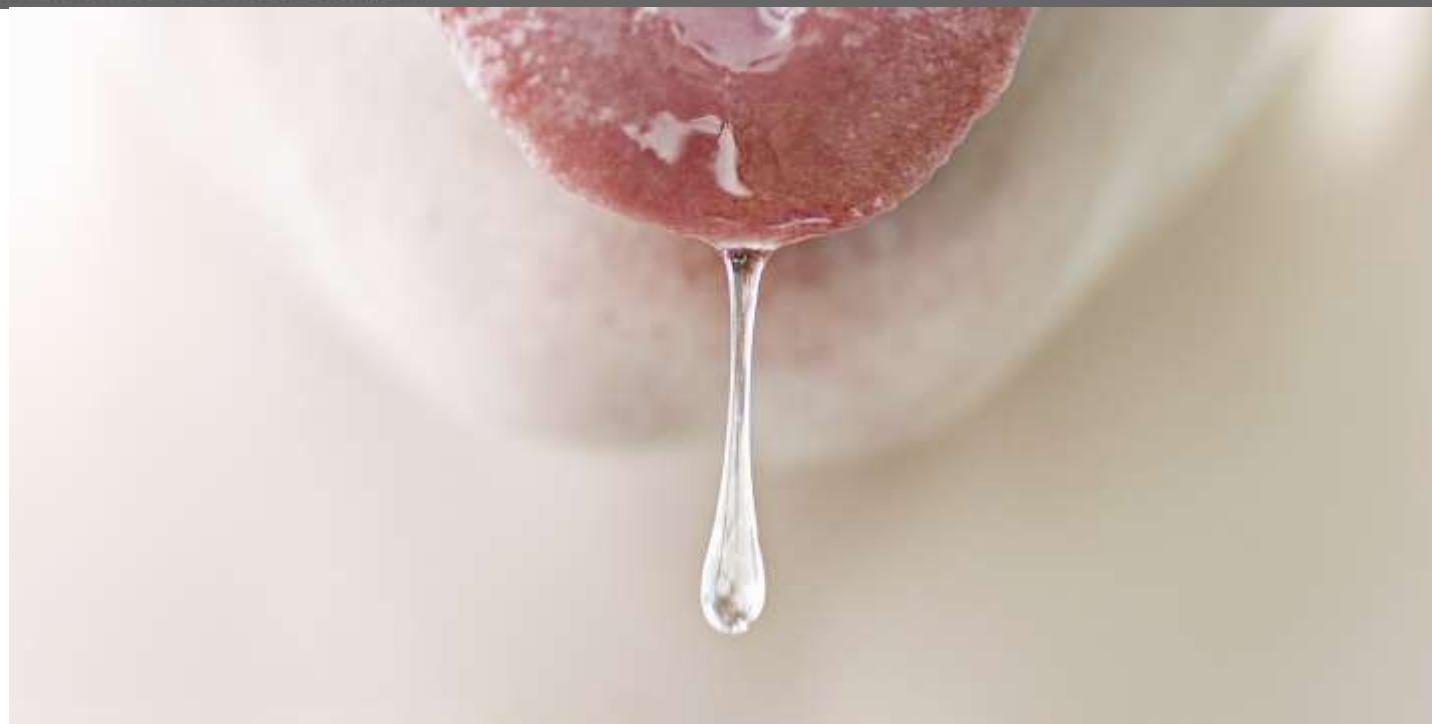
Moynihan PJ, Kelly SA.  
J Dent Res. 2014  
Jan;93:8-18.

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- 4) stimulation of saliva flow after meals  
- pH returns to resting levels more quickly



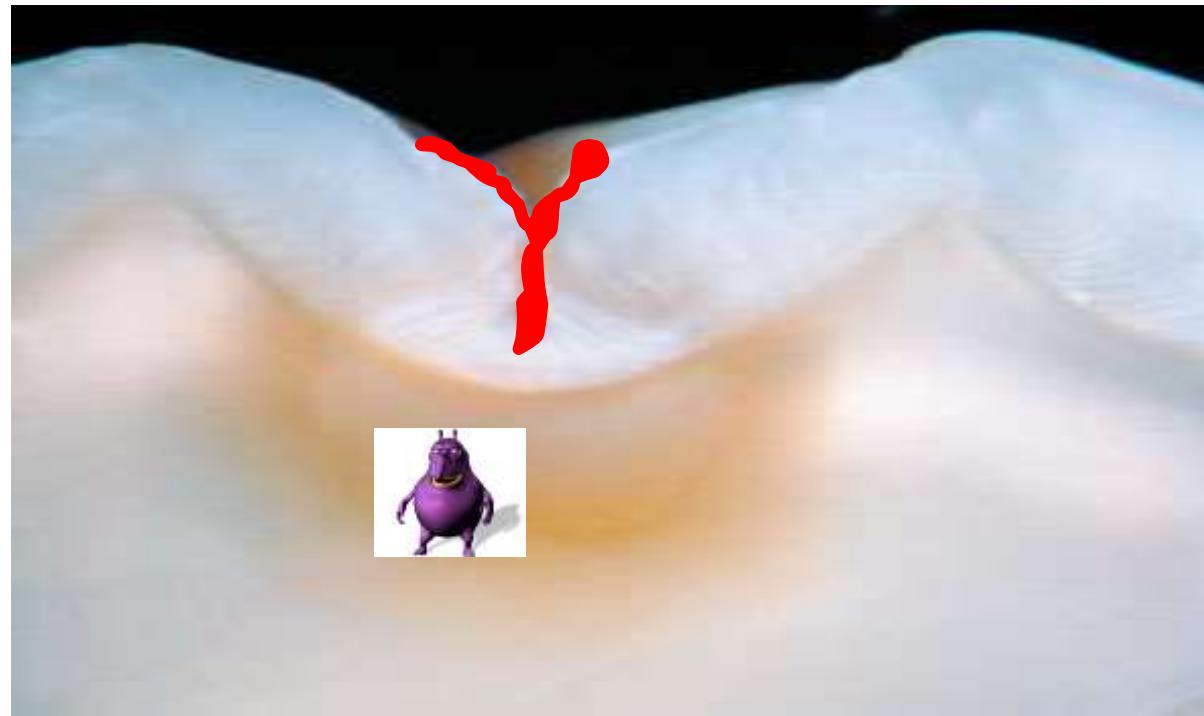


- 1.0-1.5 liter per 24h - clearance
- pH 6.5-6.9 - buffering capacity
- mucins, glycoproteins
- enzymes
- salt – electrolytes, minerals
- immunoglobulins, AMP

← contributes  
to biofilm  
control

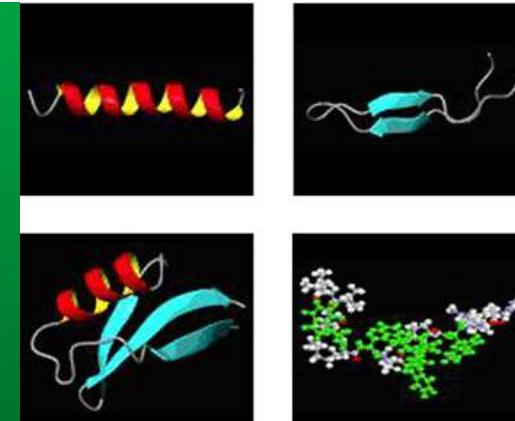


## 5) blocking of substrate - ie. fissure sealants, ART



## 6) any other approach designed to maintain pH around neutrality

- e.g. bacteriotherapy (prebiotics, probiotics), antimicrobial agents, alkali supplements, targeted antimicrobial peptides



# replacement/bacterio-/probiotic therapy

a harmless effector strain is implanted in the host's microflora to maintain or restore a natural microbiome by interference and/or inhibition of other microorganisms



Florey, 1946, Hillman, 1999





defense through diversity

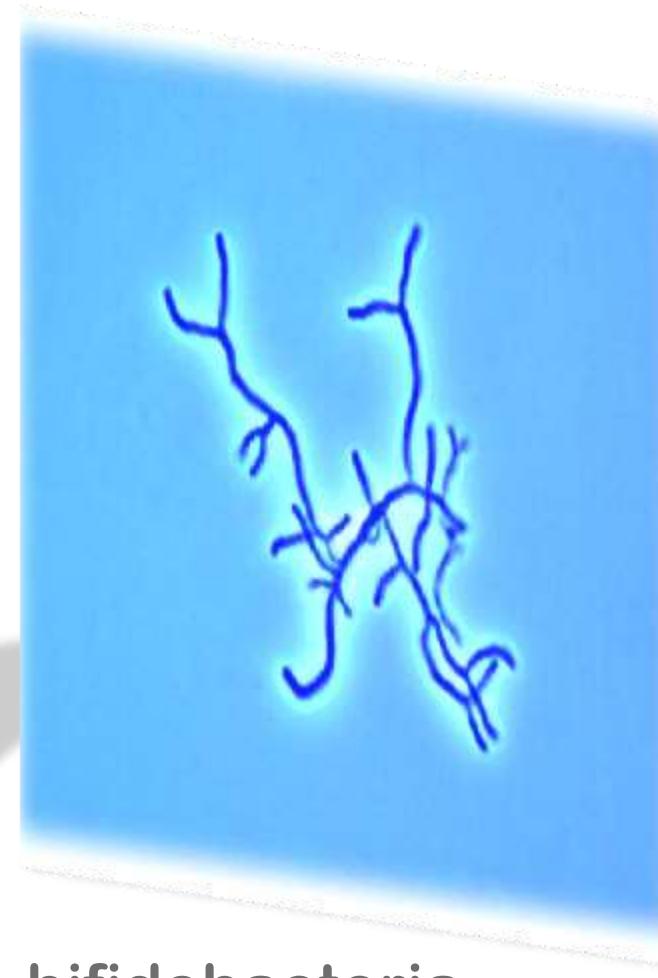
daily addition of health-promoting bacteria



*pro bios = for life*

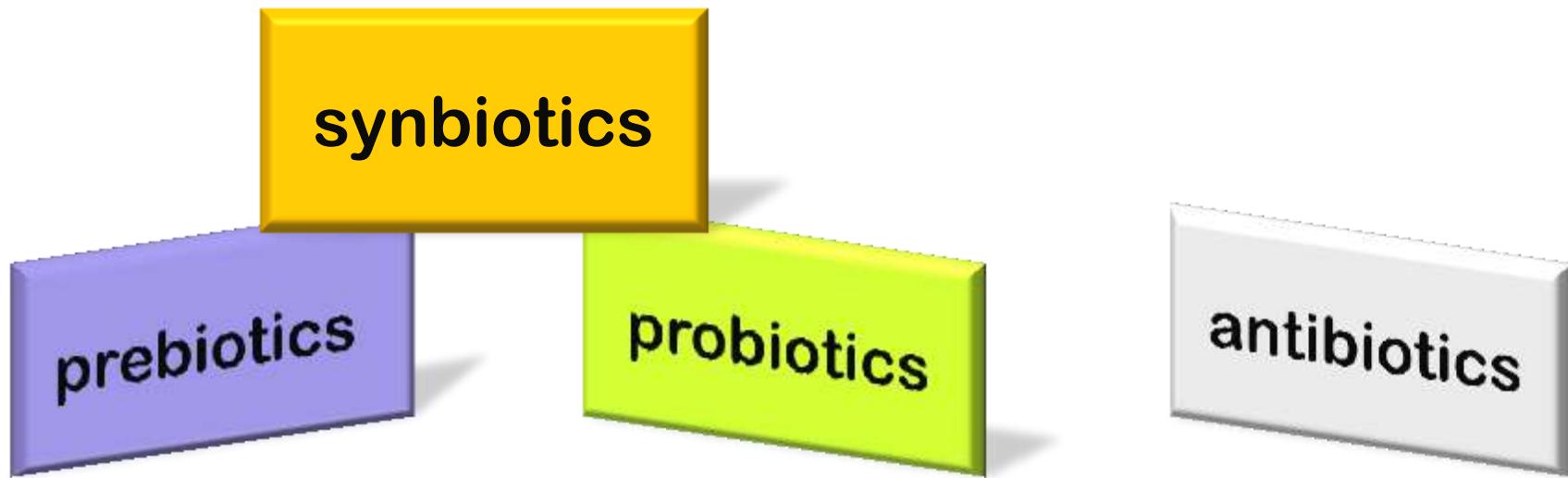


**lactobacilli**



**bifidobacteria**





FAO/WHO definition of probiotics (2001):

- “**live** microorganisms which when administered in adequate amounts confer a health benefit on the host”
- host benefits to probiotics are strain specific



# pharmaceutical medicine and bioecological medicine



+



**daily intake of  $10^{8-9}$  probiotic cells (FAO/WHO, 2003)**



**1-2 dl yoghurt**

- less costly

- Ca, P comes "free"

**1-2 tablets**

- practical

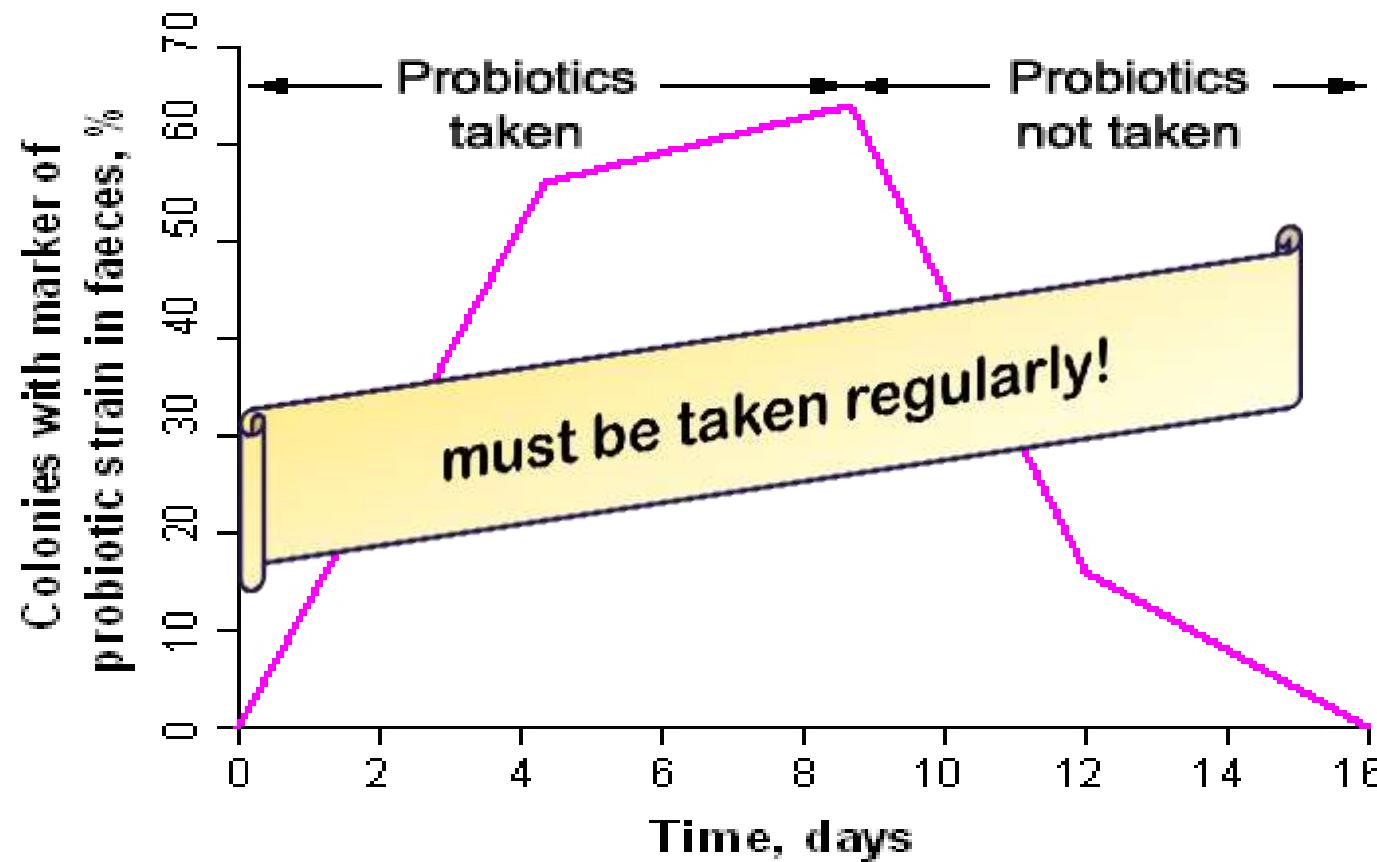
- a mix of different strains

- less sugar



# Fate of Ingested Probiotics

The appearance of ingested probiotics bacteria in faeces



Yli-Knuuttila et al., 2006; Caglar et al., 2009

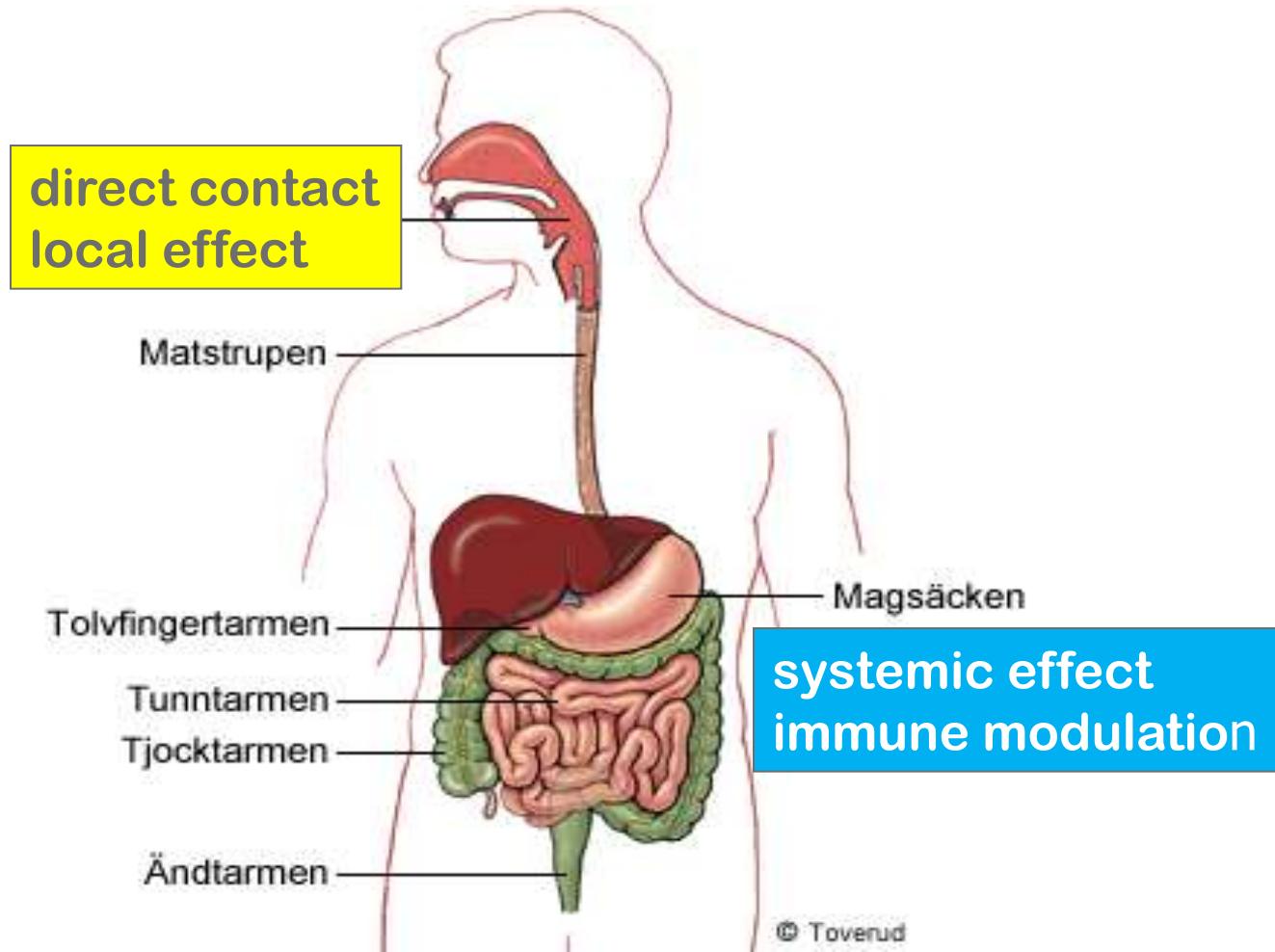




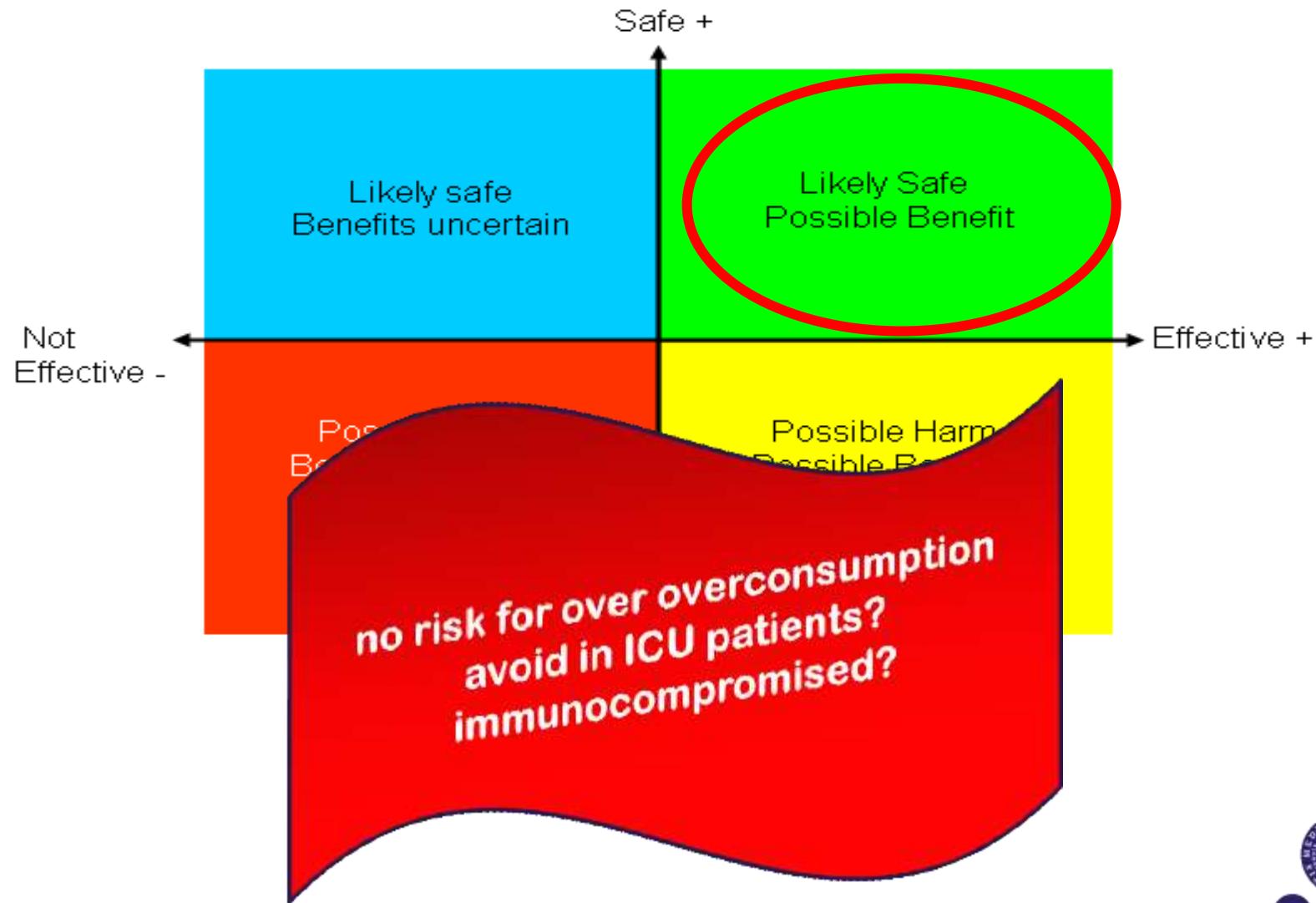
- early colonizers have an ecological advantage
- the earlier the start, the greater the chance of a persisting beneficial effect
- before 1 year



# probiotics may affect oral cavity



# GRAS = generally regarded as safe food additive



# probiotics and oral health

caries



gingivitis, tooth loss  
mucositis, candidosis



halithosis (bad breath)



tooth whitening



dry mouth

## two systematic reviews

included:

23 papers

4 low risk of bias, 9 moderate, 10 high

quality:

conclusion:

reduces *S. mutans* in plaque and saliva

Cagetti et al., 2013 Nutrients

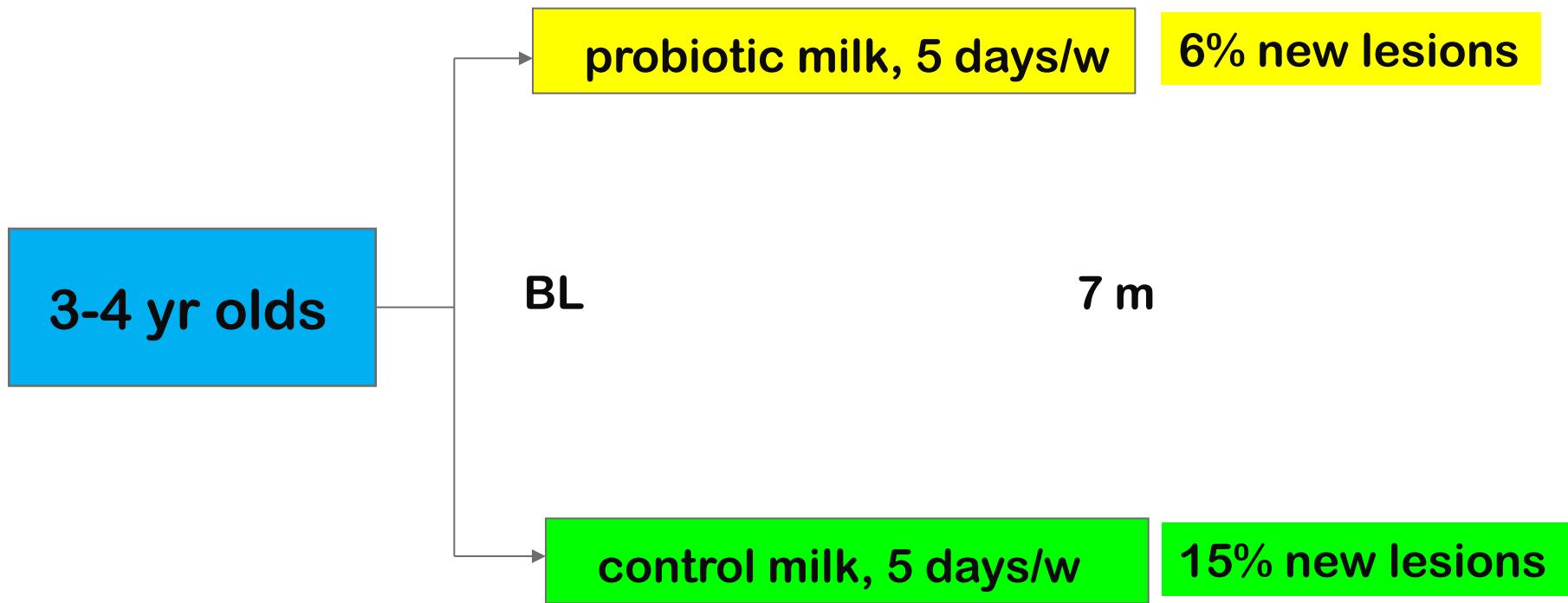
....it may be concluded that probiotics decrease the  
mutans streptococci counts. This suggests that probiotics  
could have a positive effect in the prevention of caries

Laleman et al., 2014 Clin Oral Invest



# randomized double-blind placebo-controlled trial

*L. rhamnosus GG*



# additional effects

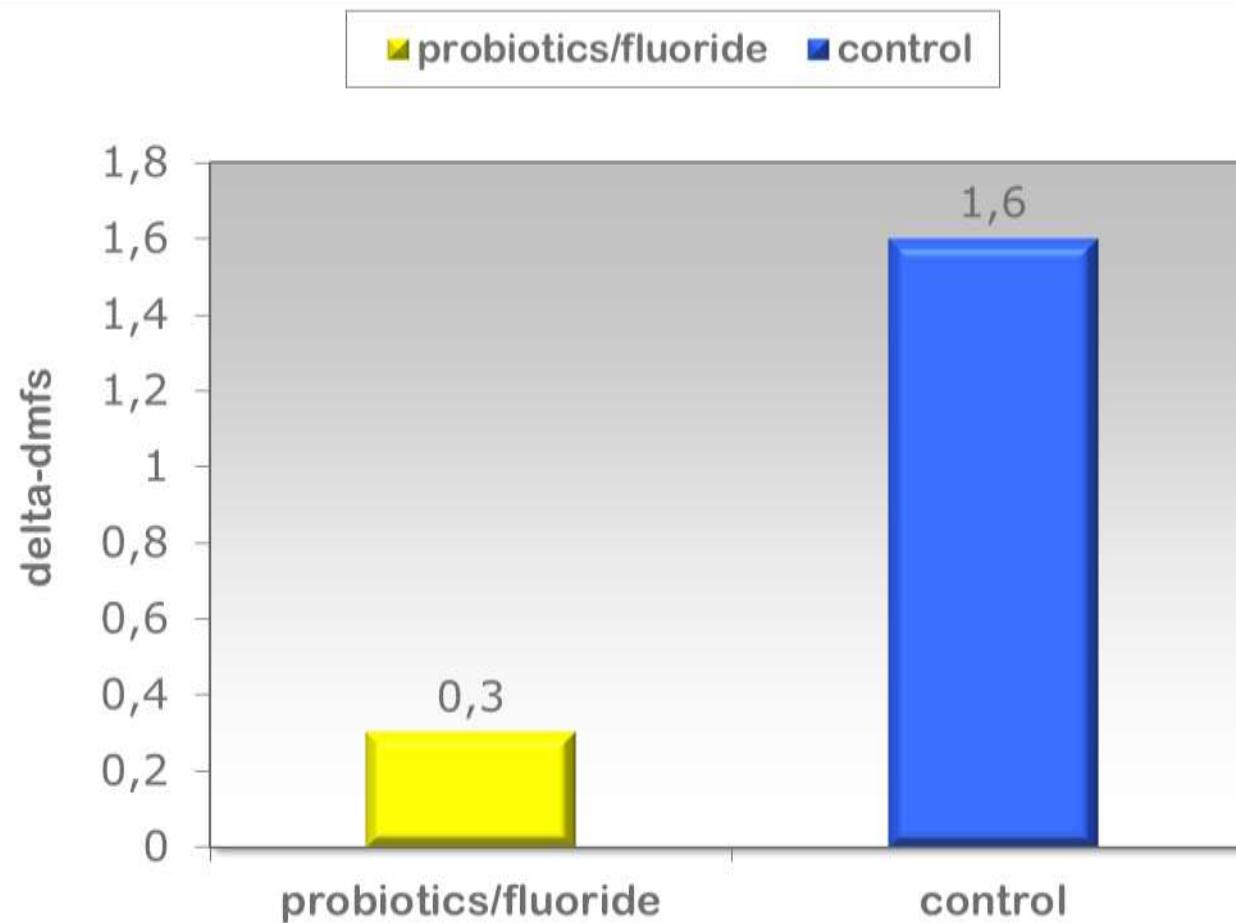
- 16% less absence from daycare
- 17% reduction of URI
- 19% less antibiotics



Hatakka et al., 2001 Br Med J



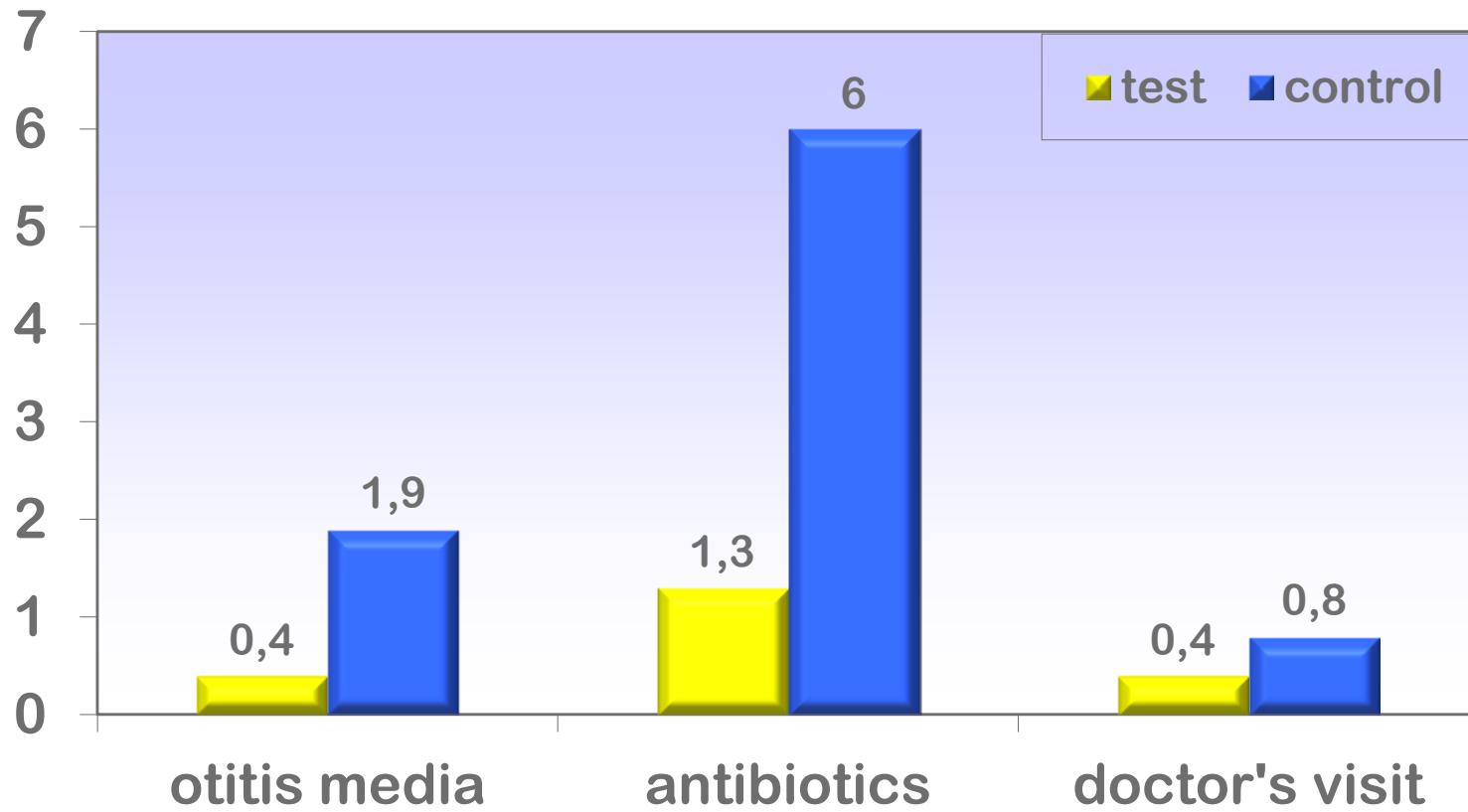
## caries incidence after 21 months



Stecksen-Blicks et al., Caries Res 2009;43:374–81



## effects on general health



Stecksen-Blicks et al., Caries Res 2009;43:374–81



# metabolic domino effect

- link between oral and general health

oral health  
improvement

mouth



general  
health  
improvement

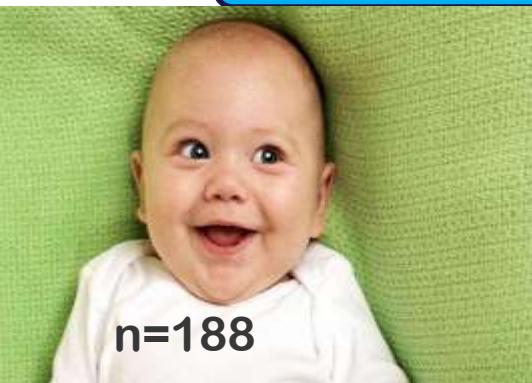
GI-channel



# long-term effect on caries after probiotic supplements during infancy

birth

*L. reuteri*, 5 drops, 0-12 months



IgE-mediated eczema

placebo, 5 drops, 0-12 months

caries  
9 years

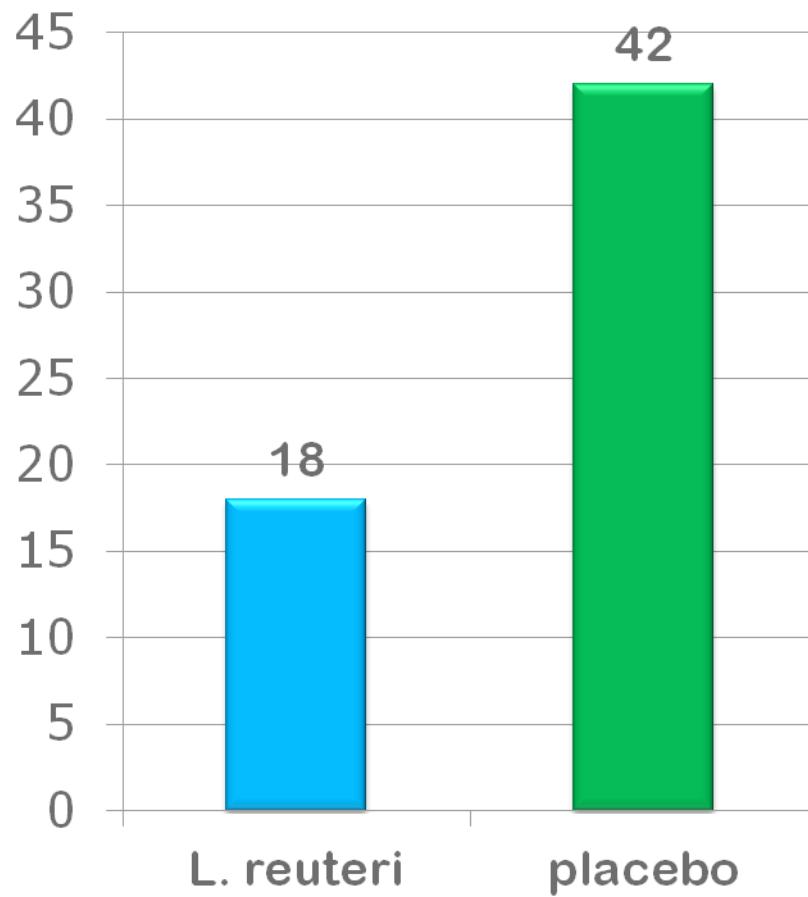
n=113

birth

Stensson et al., 2013 Car Res



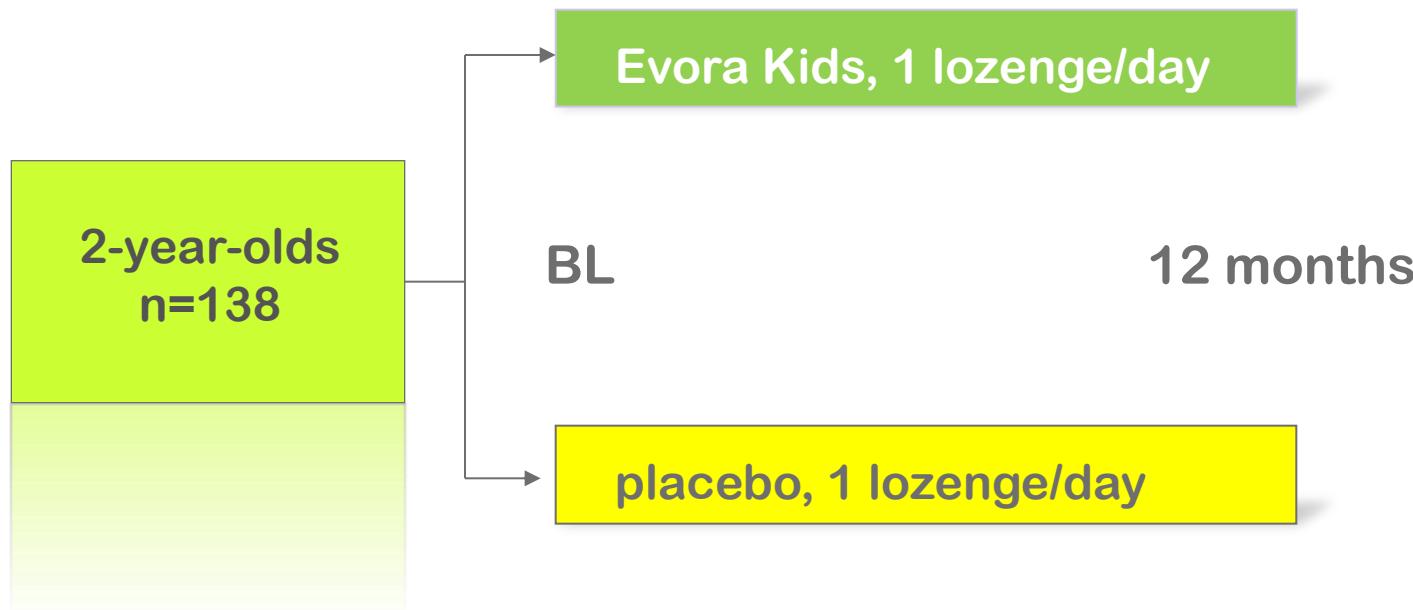
## caries prevalence (dmf>0), 9 year



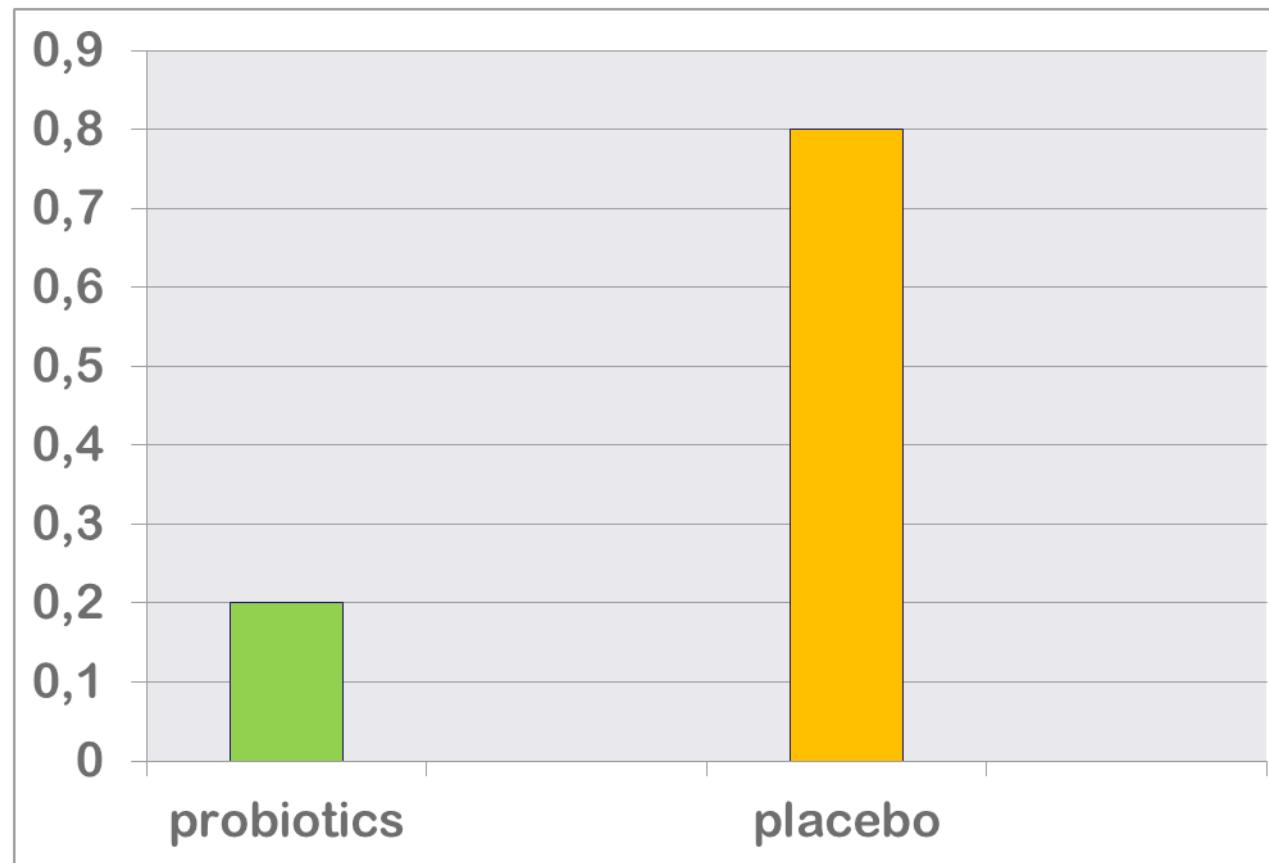
Stensson et al., 2013, Car Res



# probiotic lozenges for toddlers



## development of early childhood caries ( $\Delta\text{dmfs}$ ) in 2-3 yr-old multicultural children – 1 year RCT



Twetman et al., 2015



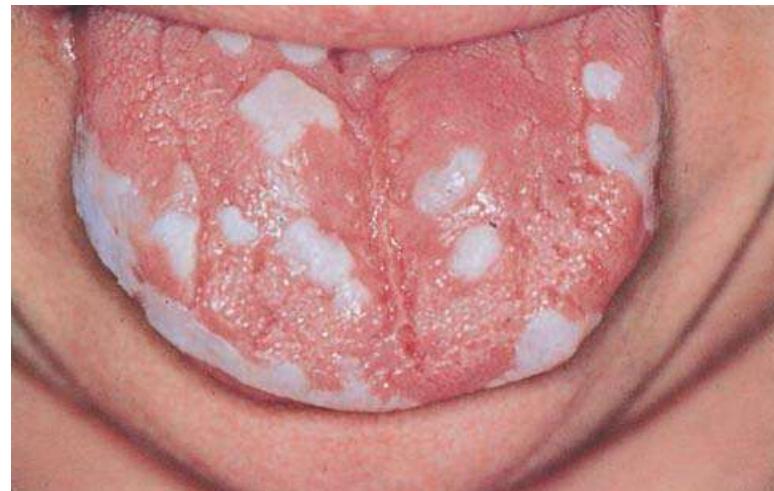
# clinical trials with caries endpoint

First author, yr	design <sup>a</sup>	n; age (yr)	vehicle, time <sup>b</sup>	strain	caries test/ctr	PF <sup>c</sup> (%)
Näse, 2001	RCT	594; 1-6 164; 3-4	milk, 7m	<i>L. rhamnosus</i> GG	15%/19% <sup>d</sup>	21%
			milk, 7m	<i>L. rhamnosus</i> GG	10%/23% <sup>d</sup>	56%
Stecksén-B, 2009	CRCT	174; 1-5	milk, 21m	<i>L. rhamnosus</i> LB21 +2.5 ppm F	Δdmfs 0.4/1.6	75%
Petersson, 2011	RCT					65%
Taipele, 2013						55%
Hasslöf, 2013		180; 6	cereals	<i>L. paracasei</i> T15	CF 80%/74%	5% (NS)
Stensson, 2013	RCT	113;9	drops, 1 <sup>st</sup> yr	<i>L. reuteri</i>	CF 82%/58%	29%
Teanpaisan, 2015	RCT	54; 14	milk powder, 1yr	<i>L. paracasei</i>	0.2/0.9	82%
H-Hajikand, 2015	RCT	150;2-4	tablets	Probiora <sup>3</sup>	0.2/0.8	75%

mean caries preventive fraction 45%

<sup>a</sup> RCT=randomized controlled trial; CRCT=cluster randomized controlled trial; <sup>b</sup>m=months; <sup>c</sup>PF=prevented fraction;  
<sup>d</sup>caries prevalence (%); <sup>e</sup> root caries reversals (%), CF= caries free

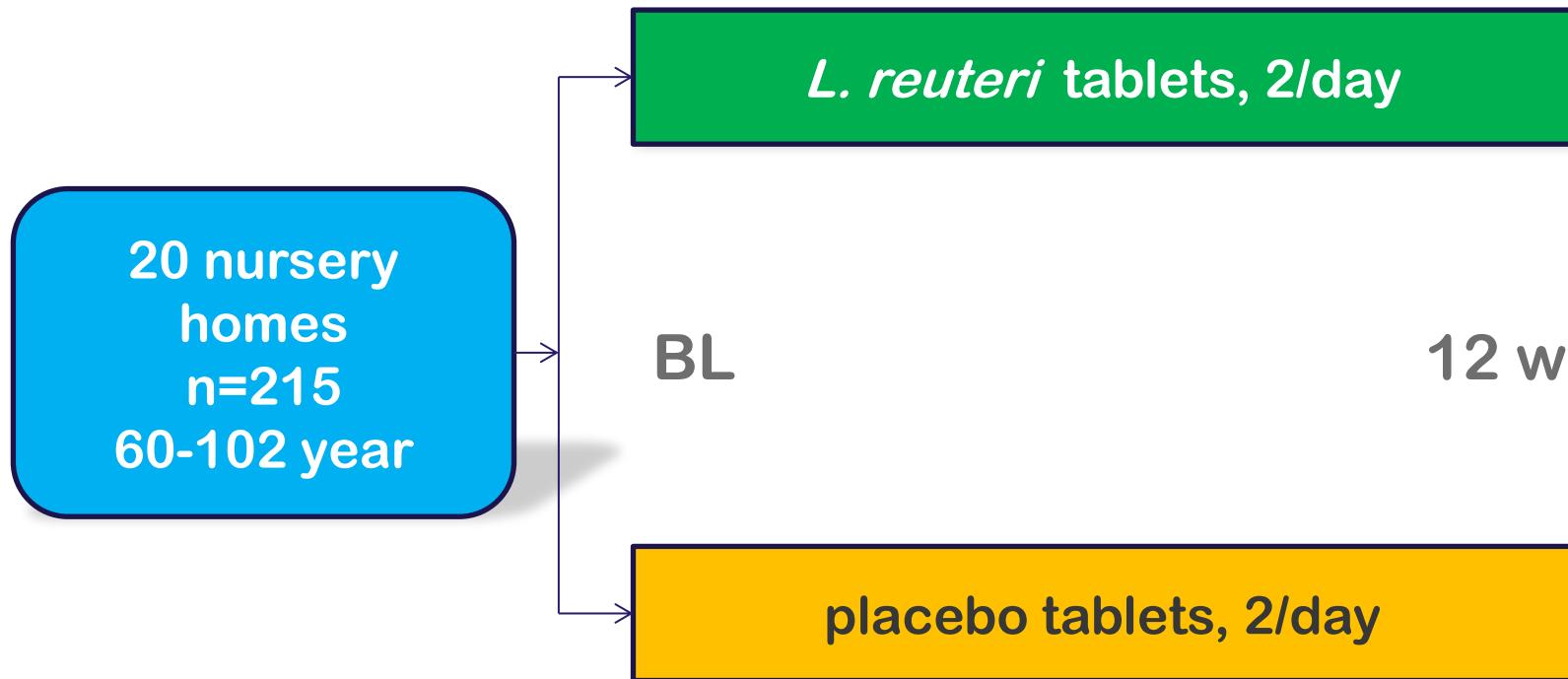
candidiasis



root caries



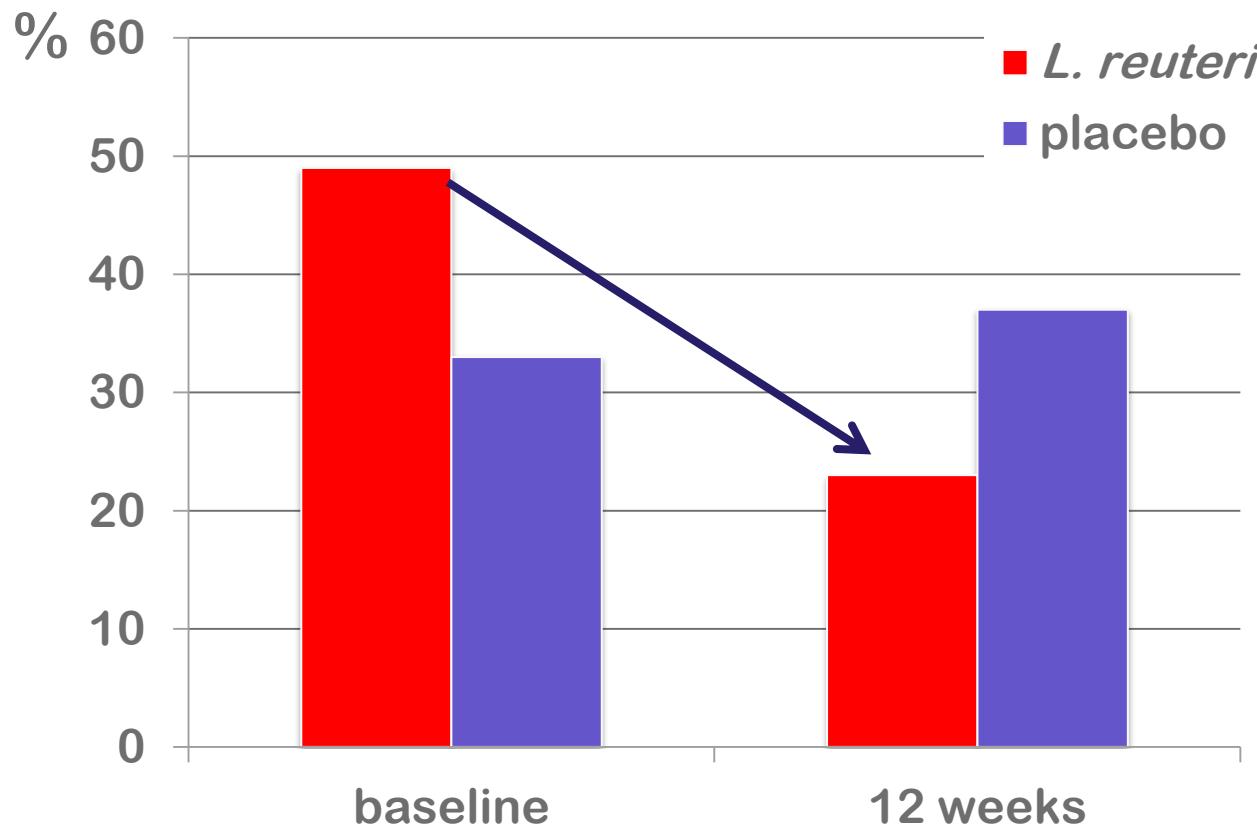
# double-blind randomized placebo-controlled trial



Kraft-Bodi et al 2015 JDR



high counts of salivary *C. albicans* after intake of *L. reuteri* tablets in elderly nursing home residents (n=227)



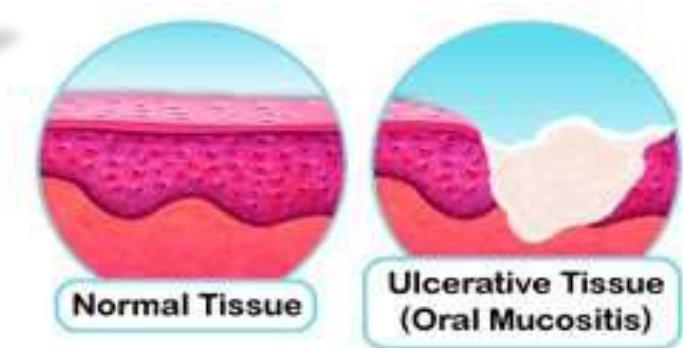
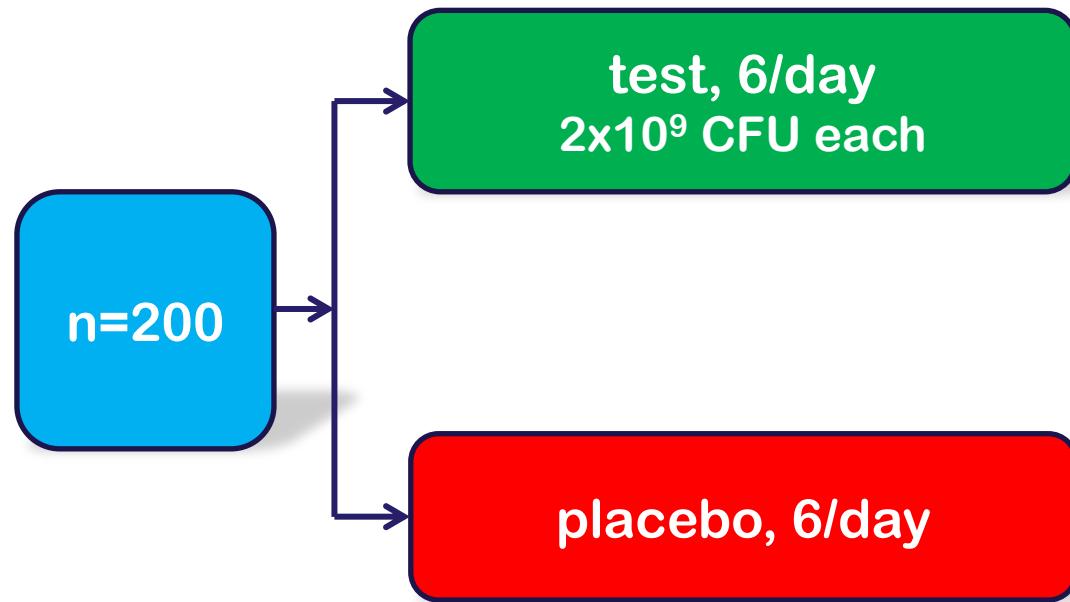
Kraft-Bodi et al., 2015 J Dent Res



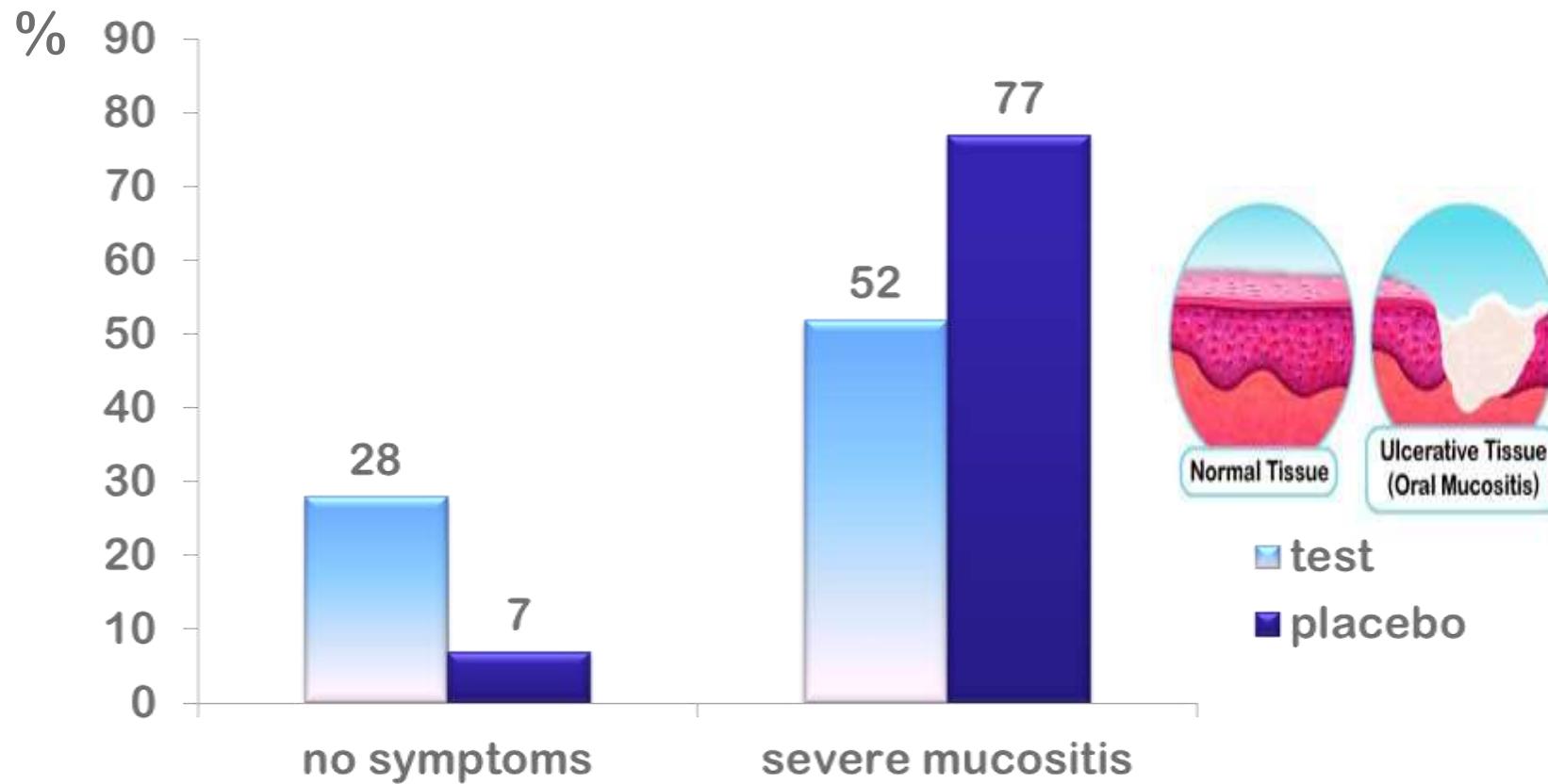
probiotic supplements can relieve mucositis among patients with head- and neck cancer, treated with chemo and radiation



# probiotic lozenges (*L. brevis*) and mucositis



# probiotic lozenges (*L. brevis*) and mucositis



Sharma et al., 2012



# probiotic reduction of gingivitis – clinical observations

day 0



day 14





after treatment with the probiotic *L. reuteri* in patients with implants presenting mucositis, the **clinical parameters improved**, and the **cytokine levels decreased** - in contraposition to the observations in the placebo group

Flichy-Fernandez et al., 2015 J Period Res





- early probiotic start may prevent caries
- a metabolic domino effect is obvious in childhood
- probiotics may reduce PI, GI, BOP and PPD
- probiotics beneficial to maintain oral balance in elderly
- probiotics supplements adjunct to fluoride and periodontal therapy



## bad breath

volatile sulphur compounds (VSC) produced by  
oral bacteria i.e. *F. nucleatum*



# probiotics reduces VSC?



- use of tablets with *Streptococcus salivarius* K12 beneficial for long-term reduction of malodour
- similar findings for *Weissella cibaria*
- reduction of volatile sulphur compounds

(Burton et al., 2005; 2006; Kang et al., 2006).





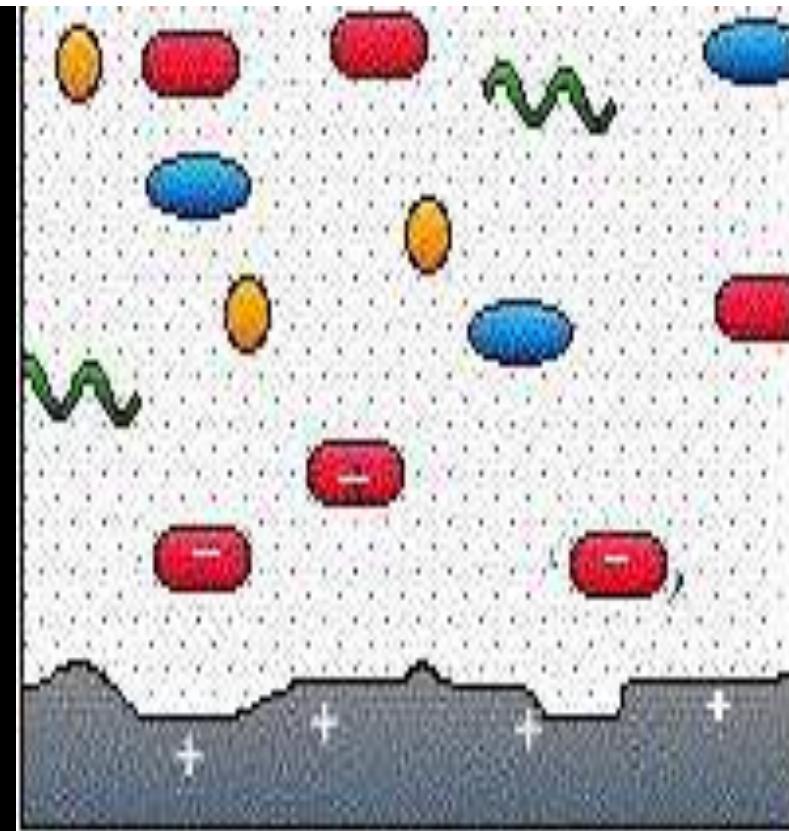
- health by nature
- control biofilm rather than killing and eradication

# future in preventive dentistry is biofilm control and biofilm engineering

## Biofilms Impact . . .



© Center for Biofilm Engineering at MSU-Biosciences



## examples of strategies to control biofilm stress

