Research progress of natural plant in treating chronic periodontitis

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Abstract: Chronic periodontitis is one of the common human diseases, and its main characteristics are periodontal inflammation and alveolar bone destruction. The traditional treatment method is mechanical treatment. At present, antibiotics are commonly used to treat chronic periodontitis. Due to its side effects such as drug resistance and disruption of microbial environment, the natural medicine gradually show their advantages, it becomes a research hotspot. Since antiquity, Chinese traditional medicine and compound preparations have been used in the prevention and treatment of oral diseases. This article shows the research progress of natural plant in the treatment of chronic periodontitis.

Keywords: Chronic periodontitis, Natural plant, Treatment

1. Introduction

Chronic periodontitis is occurring in the periodontal support tissue of periodontal inflammation and alveolar bone destruction as the main characteristics of chronic disease^[1], its number accounts for 10% -15% of the total number of the world^[2], and gradually younger age trend, if not timely treatment, with the further development of periodontal inflammation, will lead to missing teeth, seriously affect the life of patients^[3].Oral health not only reflects the oral state of patients, but also has a certain impact on the physiology and psychology. Good oral health has become one of the ten standards of human health, so the treatment of periodontitis is very important^[4]. The traditional treatment of chronic periodontitis is based on mechanical methods, including subgingival curettage and root surface leveling^[5]. Due to the complexity of root anatomy, the completecontrol of periodontitis can not be achieved by mechanical treatment alone, so it is necessary to use drugs as adjuvant treatment on the basis of previous treatment^[6]. Atpresent, the clinical treatment of periodontitis adjuvant antibiotics, such as amoxicillin and metronidazole^[7-9], metronidazole and azithromycin^[7], azithromycin^[8], metronidazole^[9], levofloxacin^[9], moxifloxacin^[9], erythromycin^[9], etc. But still need to pay attention to the possibility of antibiotic resistance and antibiotics on the human microbial environment^[10], and systemic adverse reactions when antibiotics is more^[9]. In recent years, the combination of traditional Chinese and western medicine is more and more extensive in the treatment of periodontitis, such as Xipayi mouth rinse + minocycline hydrochloride^[11,12], erythritol^[13,14], rehabilitation new fluid + minocycline^[15], etc. Numerous studies have shown that natural plants have anti-inflammatory, antioxidant and anti-tumor effects, and these extracts may exert their potential medicinal value in the treatment of periodontitis^[16].Many scholars have chosen a large number of natural plants to study thetreatment of periodontitis, such as Skullcap, Curcuma longa L, Pueraria lobata, Naringin, Paeoniflorin, resveratrol,

In recent years, the recognition of natural drugs in countries around the world has been increasing^[17].It is not only widely used in traditional medicine countries such as China and India,but also shows great potential in medical care in the European Union, Singapore, the United States,the United Kingdom and other regions. The research on chronic periodontitis treatment has gradually attracted attention. The natural plants for the treatment of chronic periodontitis are briefly summarized.

2. Cistanche deserticola Ma

Cistanche deserticola Ma,is one of the "nine Chinese herbs", known as "desertginseng", itschemical

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structure is complex, has purified and identified more than 150 kinds of chemical family,including ,Phenylethanoid glycosides,Benzylglycosides, secoiridoid, lignin, oligosaccharides and polysaccharides, etc. Amongthem, Phenylethanoid glycosides has received wide attention worldwide due to its favorable pharmacological properties^[18].Modern pharmacology has found that Cistanche deserticola Ma has anti-inflammation, anti-fatigue, anti-oxidation,anti-tumor, enhancement of immunity and other effects of^[19], and has a good safetyprofile^[20].

The extract of Cistanche has been reported $^{[21]}$ that through prevent the receptoractivator of nuclear factor Kappa B ligand (RANKL) / receptor activator of nuclear factor Kappa B (RANK) / tumor necrosis factor receptor (TNFR)-associated factor 6 (TRAF6) induced nuclear factor Kappa B activation, promote theupregulation of the phosphoinositide 3-kinase (PI3K) / Protein kinase B (Akt) , activation of the proto-oncogene c-fos, and inhibition of nuclear factor of activated T cells 2 (NFATC2), final inhibition of osteoclast differentiation and corresponding bone resorption was inhibited. Li $^{[22]}$ demonstrated through in vitro and in vivo studies that the Cistanche extract can promote bone formation and the expression of alkaline phosphatase (ALP) , osteocalcin (OCN) , bone morphogenetic proteins 2 (BMP2) and bone mineralization.

In vitro experiments^[23] have found that Cistanche can reduce the formation of osteoclasts and the expression of osteoclasts marker genes Matrix metalloproteinase 9 (MMP 9), cathepsin K (CTSK) and tartrate-resistant acid phosphatase 5 (TRACP5), and inhibit the production of the reactive oxygen species (ROS) mediated by RANKL in vitro, the activation of nuclear factor of activated T-cell (NFATc) and mitogen-activated protein kinase (MAPK). In conclusion, Cistanche has potential value in the treatment of the alveolar bone loss in chronicperiodontitis.

3. Curcuma

Curcuma is a traditional Chinese medicine, derived from the dried root of Curcuma longa L, mainly produced in Chinese Sichuan , Fujian , Guangdong , Guangxi , Yunnan , Xizang and other provinces and regions. Curcuma first contained in the Tang Dynasty "new herbal", warm, bitter, spicy, return to the spleen, livermeridian, has the effect of breaking blood, dysmenorrheaand pain relief^[24]. The main components of Curcuma are essential oil and curcumin. A large number of experiments and clinical studies have shown that curcumin antioxidant, anti-inflammatory, anti-cancer and antiviral infection pharmacological effects^[25]. A meta-analysis of^[26] evaluated the clinical effect of curcumin and chlorhexidine for the treatment of chronic periodontitis. Since curcumin is a natural food, it is a good candidate for adjuvant periodontitis treatment.

Sha^[27] confirmed by in vivo experiments that curcumin reduced bone resorptionand osteoclast formation by inhibiting RANKL expression and increasing osteoprotegerin (OPG) release, alleviated alveolar bone loss, and attenuated periodontal inflammation, we also found that curcumin had less side effects on periodontal tissue compared with chlorhexidine. Some scholars^[28] have confirmed throughexperiments in vitro that curcumin has no toxic effect on human periodontal ligament stem cells at moderate concentration, and can promote the osteogenic differentiation of human periodontal ligament stem cells (hPDLSCs) through PI3K / AKT signaling pathway.

4. Puerariae Lobatae Radix

Puerariae Lobatae Radix is the tuber of the legume, which is a strong vine, which was written in Shennong Materia Medica Classic.Puerariae Lobatae Radixhas a long history of application in China. The ancient Chinese, it has the functions of relieving muscle fever, quenchingthirst, penetrating rash,and relievingalcohol poison,modern pharmacological studies show that it has bacteriostatic,anti-myocardial ischemia, antioxidant, anti-tumor, anti-convulsant, puzzle and other effects. Some scholars showed through systematic evaluation that puerarin can beused as an effective osteogenic promoter, but also as an inhibitor of RANKL-induced osteoclastogenesis, and through in vitro and in vivo studies, puerarin was found to have a great effectonthe osteogenic capacity of osteoblasts.

Some studies found through in vitro and in vivo experiments that puerarin can reverse the bone destruction of glucocorticoids, improve the viability of osteoblasts, and promote the differentiation of osteoblasts and the expression of osteogenesis-related genes; through in vivo experiments found that puerarin canreduce the activity of Alkaline phosphatase (ALP) in osteoblasts under high glucose and promote the expression of type I collagen (Col-1). Chinese scholar Zhao Bing found through the

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curative effect observation of clinical trials that after basicperiodontal treatment, the depth and attachment of periodontal pockets were significantly improvedafter oral puerengqin decoction treatment, periodontal tissue was restored, and the decoctionhad high safety, which is worthyof clinical promotion. Thus, puerarin could be a more selective and safedrug to slowing alveolar bone loss in chronic periodontitis.

5. Resveratrol

Resveratrol is a natural polyphenol non-flavonoid compound, which is widely found in a variety of plants, mainly derived from grapes, soybeans, peanuts and berries. Its pharmacological effects include anti-oxidation, anti-inflammatory, anti-tumor, antibacterial, bone protection, cardiovascular protection and so on. Based on a large number of experimental studies, it is found that resveratrol promote the proliferation and differentiation of osteoblasts in vitro and in vivo, and inhibit the differentiation of osteoclasts to protect bone tissue. The configuration of drugdelivery system in the form of scaffold can improve andoptimizethe efficacy of resveratrol.

After the successful establishment of the mouse model of periodontitis, due to the severe destruction of periodontal tissue, the extraction of ligated molar teethand local intervention of resveratrol. Compared with the control group, the alveolar socket of the treatment group had significantly increased bone tissue, the periodontal tissue also recovered, and the inflammatory factors decreased significantly. Scholar has also found through in vitro experiments that resveratrolcan improve the inflammatory microenvironment and enhance the osteogenic differentiation of hPDLSCs by activating the Extracellular signal-regulated kinase (ERK (1/2)) pathway. Thus, resveratrol may be a good candidate for anti-inflammatory agents that can ameliorate the inflammatory microenvironment-induced bone remodeling.

6. Salvia miltiorrhiza Bge

Salvia miltiorrhiza Bge is a traditional Chinese medicine, first contained in "Shennong Materia Medica", is a lip plant, is the dry root and root of Salvia miltiorrhiza Bge, bitter taste, slightly cold, liver meridian has blood circulation andblood stasis, clear heart and remove annoyance and other functions. The major tanshinones isolated from Salvia miltiorrhiza Bge included 15, 16-dihydrotanshinone, tanshinone I, cryptotanshinone, and tanshinone IIA with anti-inflammatory and anti-osteoporotic effects. Foreign researchers collected a large number of studies to show that tanshinone promotes bone remodeling by inhibiting osteoclastogenesis and bone resorption, while promoting osteobogenesis and bonedifferentiation. Some studies have found that tanshinone can improve bone loss and bone metabolism and promote osteogenesis through in vitro and in vivoexperiments. Chinese scholar Jiang Saifang through clinical observation of the efficacy of Danshen tablets in chronic periodontitis patients after basic treatment found thatthe control of periodontal inflammation and the recovery of periodontal tissue in patients taking Danshen tablets had obvious effects, with good short-term clinical efficacy.

7. Summary

In conclusion, the adjuvant drug of chronic periodontitis is still dominated by antibiotics. Due to the antibiotic resistance and its impact on the microbiota, natural plants gradually enter the attention of researchers. Studies on natural plants mainly focus on the control of inflammatory factors, bone metabolic pathways, and tissue destruction mediated by inflammatory mediators, so as to control periodontitis and promote tissue regeneration.

When natural plants are used as adjuvant drugs, the agent status, purification method, concentration and frequency of use are also our concern. Clinicians topical application of curcumin nanoparticles in the adjuvant treatment of chronic periodontitis, did not observe the beneficial effect of the patient's condition; however, others topical curcumin gel as the adjuvant drug after mechanical treatment of chronic periodontitis was observed the periodontal pocket depth and attachment level were significantly improved after a mounth. Chinese scholarYuan Yuan through meta-analysis, short-term (during a mounth) follow-up observation of patients with topical curcumin gel and chlorhexidine, and the attachment level of the former improved more significantly. It is expected that future experiments will consider this issue more comprehensively.

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Natural plant composition is complex and there are numerous experimental studies showing that natural drugs can be used to treat chronic periodontitis, but clinical applications is still limited. Natural drug single-combination use is also aproblem that we need to think about. InChina, chronic periodontitis is mainlytreated in the form of combined Chinese medicine. It is expected that future studies can combine drugs to a single form or active ingredient to realize the precision of adjuvant drug therapy.

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