

EFEKTIVITAS BERKUMUR DENGAN ALOE VERA 25% TERHADAP GINGIVITIS

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Gingivitis is a periodontal disease with high prevalence in the community. Bacterial accumulation in plaque is one of the main causes of this disease. The removal of plaque by chemical agents can reduce the severity of gingivitis. In recent years, researchers have started to use mouth rinse containing traditional (natural) elements such as sirih leaves, Randu honey, and so on because of their efficacy. Aloe vera is one of the natural elements, which is easy to be found and prepare as an oral rinse. Some of its characteristics, which are effective in wound healing, are antibacterial, antifungal, and blood flow elevation. There has been no research in the effectiveness of Aloe vera 25% to gingivitis until now. This experiment is aimed to investigate the effectiveness of rinsing with Aloe vera to gingivitis. 60 patients with mild to severe gingivitis, age 14 - 45 years old who fulfilled the inclusion criterion. Samples were divided into two groups. The first group was instructed to rinse with Aloe vera 25% and the second group as a control group with H₂O₂ 3% twice a day, in four days after brushing their teeth in the morning and at night. Plaque Index and Papillae Bleeding Index score were recorded on the first day before the rinsing and at the fifth day after the rinsing. T-test was used to determine the difference of effectiveness of both rinse solution to any changes of Plaque Index and PBI on samples. The result showed significant reduction of Plaque Index and PBI (0.673 and 0.750) which is higher in groups rinsing with Aloe vera than control group (0.337 and 0.231)(p,0.01). Rinsing with Aloe vera for at least 4 days is more effective in preventing or healing gingivitis than H₂O₂ 3%.

Key Words : *Aloe vera 25% solution, gingivitis therapy, Plaque Index and bleeding score reduction; clinical effect.*

PENDAHULUAN

Inflamasi gingiva dan penyakit periodontal dipicu oleh akumulasi bakteri yang berada di area dento gingival (Steinsvoll dkk, 2004). Inflamasi gingiva sebab restorasi komposit di servikal gigi sering diabaikan jika higiene

mulutnya baik dan restorasinya dengan adaptasi marginal yang sempurna. Namun setelah restorasi tersebut lama misalnya lebih dari 3 tahun, keberadaan plak bakteri lebih meningkat dan inflamasi gingivanya lebih nyata (Peumans dkk, 1998). Berarti kolonisasi bakteri ini menunjukkan multiplikasinya