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Title of Master’s Thesis

**The effect of Chios’ mastic mouthwash on halitosis and
oral hygiene in orthodontic patients: a randomized
clinical trial**

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Τίτλος Μεταπτυχιακής Διπλωματικής Εργασίας

Η επίδραση του στοματικού διαλύματος με μαστίχα Χίου
στην κακοσμία και στοματική υγιεινή ασθενών υπό
ορθοδοντική θεραπεία: τυχαιοποιημένη κλινική δοκιμή

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Τριμελής Εξεταστική Επιτροπή

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Περίληψη

Η κακοσμία του στόματος (χαλίτωση) αποτελεί συχνό φαινόμενο και διαχωρίζεται σε φυσιολογική ή παθολογική. Η πρώτη είναι σχετιζόμενη με τον ύπνο, το κάπνισμα, την κατανάλωση αλκοόλ ή έχει ορμονικό υπόβαθρο. Η παθολογική κακοσμία του στόματος προέρχεται κατά κύριο λόγο από τη στοματική κοιλότητα και οφείλεται στον μεταβολισμό των μικροβίων στις επιφάνειες της στοματικής κοιλότητας. Οι ασθενείς με ακίνητους ορθοδοντικούς μηχανισμούς είναι περισσότερο επιρρεπείς στην κακοσμία του στόματος λόγω της δυσκολίας στην αποτελεσματική στοματική υγιεινή. Η μέτρηση της κακοσμίας μπορεί να γίνει με τη χρήση τριών αντικειμενικών μεθόδων: οργανοληπτική μέθοδος, χαλιμετρία και αεριο-χρωματογραφία. Η τελευταία αποτελεί την πιο πρόσφατη μέθοδο αξιολογεί τη συγκέντρωση των τριών πιο συνηθισμένων πτητικών ενώσεων θείου (ΠΕΘ) που σχετίζονται με την κακοσμία. Αυτά είναι: το υδρόθειο (H_2S), η μεθυλ-μερκαπτάνη (CH_3SH) και το διμεθυλσουλφίδιο [$(CH_3)_2S$]. Σκοπός της παρούσας μελέτης ήταν να διερευνηθεί η επίδραση του στοματικού διαλύματος με μαστίχα Χίου στην κακοσμία του στόματος και στους δείκτες πλάκας και φλεγμονής σε ασθενείς υπό ορθοδοντική θεραπεία με ακίνητους ορθοδοντικούς μηχανισμούς. Η μελέτη ήταν μια προοπτική, διπλά τυφλή, ελεγχόμενη με εικονικό φάρμακο, τυχαιοποιημένη κλινική δοκιμή με δύο παράλληλες ομάδες. Τριάντα ασθενείς με ακίνητους ορθοδοντικούς μηχανισμούς κατανεμήθηκαν τυχαία σε αναλογία 1:1, είτε στην ομάδα μαστίχας είτε στην ομάδα εικονικού στοματικού διαλύματος. Όλοι οι συμμετέχοντες έλαβαν στοματικά διαλύματα για 2 εβδομάδες. Τα κριτήρια επιλεξιμότητας περιλάμβαναν ηλικίες μεταξύ 13 και 18 ετών, ενεργή ορθοδοντική θεραπεία με ακίνητους ορθοδοντικούς

μηχανισμούς, καλή γενική υγεία και συνολικά αρχικά επίπεδα ΠΕΘ πάνω από το επίπεδο των 150ppb: Οι μεταβλητές που αξιολογήθηκαν ήταν: (α) η κακοσμία μέσω των επιπέδων ΠΕΘ με τη συσκευή Oral Chroma™, (β) η υποκειμενική αντίληψη της κακοσμίας μέσω ερωτηματολογίων και (γ) η στοματική υγιεινή μέσω του τροποποιημένου δείκτη πλάκας (PI-M) και του δείκτη φλεγμονής (GI) τόσο κατά την έναρξη (T0) όσο και μετά από 2 εβδομάδες (T1). Στην ομάδα μαστίχας, τα επίπεδα υδρόθειου μειώθηκαν από 221,00ppb (T0) σε 125,00ppb (T1) και η διαφορά μεταξύ των θεραπειών ήταν στατιστικά σημαντική και υπέρ της ομάδας μαστίχας. Ωστόσο, οι διαφορές στα επίπεδα των άλλων δύο αερίων, της μεθυλ-μερκαπτάνης και του διμεθυλσουλφιδίου, δεν ήταν στατιστικά σημαντικές. Οι δείκτες στοματικής υγιεινής παρουσίασαν μικρές διαφορές και στις δύο ομάδες, ενώ οι υποκειμενικές μετρήσεις της κακοσμίας του στόματος δεν παρουσίασαν διαφορές. Συμπερασματικά, τα στοματικά διαλύματα μαστίχας θα μπορούσαν να αποτελέσουν εναλλακτικό τρόπο ελέγχου πιθανής κακοσμίας του στόματος σε έφηβους ασθενείς κατά τη διάρκεια της ορθοδοντικής θεραπείας με ακίνητους μηχανισμούς.

Λέξεις κλειδιά: Χαλίτωση, Στοματικό διάλυμα, Μαστίχα Χίου

Abstract

The aim of this study was to investigate the effect of Mastic mouthwash on halitosis (Volatile Sulfur Compounds' levels, VSCs) as well as plaque and gingival indexes in patients undergoing orthodontic treatment with fixed appliances. The study was a double-blinded, placebo-controlled, parallel group, randomized clinical trial. Thirty patients with fixed orthodontic appliances were randomly allocated at a 1:1 ratio, to either the mastic-mouthwash or the placebo-mouthwash group. Eligibility criteria included ages between 13 and 18, active orthodontic treatment with fixed appliances, good general health and total initial VSCs levels above the baseline level of 150ppb. The primary outcomes were: (a) their subjective perception of their own malodor via questionnaires, (b) their objective VSCs levels (hydrogen sulfide (H_2S), methyl-mercaptan (CH_3SH) and dimethyl sulfide [$(CH_3)_2S$] through the Oral Chroma™ device and (c) oral hygiene assessed with the use of the Modified Silness and Löe Plaque Index (PI-M) and the Silness and Löe Gingival Index (GI) at both baseline (T0) and after 2 weeks (T1). Stratification by gender randomization was implemented with two random sequences, one for each mouthwash, concealed in opaque numbered sealed envelopes. H_2S level dropped from 221.00ppb (T0) to 125.00ppb (T1) and the difference between treatments was statistically significant and in favor of the mastic group (coef: 72.34, 95% CI: 8.48, 136.27, $p=0.03$). The reduction in the levels of the other VSCs did not differ between treatment arms. The oral hygiene indexes showed little differences in both groups whereas the subjective measurements of oral malodor did not show any differences. Mastic mouthwashes could be an alternative

treatment for adolescent patient suffering from halitosis during the orthodontic treatment with fixed appliances.

Keywords: Halitosis, Mouthwash, Chios' mastic

Introduction

Halitosis is the third most common oral condition perceived by the patients as pathologic, after caries and periodontal diseases [1]. The available epidemiologic studies estimate that 30-50% of the population experience oral malodor [2,3]. Halitosis can be categorized as physiologic and pathologic. Physiologic halitosis is quite common in the morning (also known as morning breath) and probably related to normal nocturnal hyposalivation and increased microbial metabolic activity during sleep [4]. It can also be the consequence of smoking or consumption of either alcohol or odiferous food and drinks and can also be aggravated by menstruation in women [5,6]. Pathologic halitosis most commonly ($\cong 85\%$) originates from the oral cavity and is a result of bacterial deposits that cover the tongue or are found in the inflamed oral mucosa, under poor-quality restorations, orthodontic mechanisms, carious lesions or mucosal ulcers [7,8]. Odor usually results from the microbial degradation of organic substrates present in saliva [9-11]. This interaction generates malodorous volatile sulfur compounds (VSCs), of which the three most common are: hydrogen sulfide (H_2S), methyl-mercaptan (CH_3SH) and dimethyl sulfide [$(CH_3)_2S$] [12].

Orthodontic patients with fixed appliances are more prone to halitosis, due to the impaired oral hygiene and therefore increased plaque accumulation and increased amounts of available nutrients for the supragingival and subgingival microbes [13,14]. For the assessment of halitosis there are 3 objective measurements available: 1) organoleptic measurement, 2) halimetry (sulfide monitoring) and 3) gas chromatography. The organoleptic measurement is considered as the gold standard and could be performed directly by the investigator at a fixed distance by smell.

Alternatively, the patient may slowly breathe in a plastic tube and a calibrated examiner evaluates the smell coming out of the tube in a scale from 0 to 5. Halimetry is the assessment of halitosis through a sulfide monitor (Halimeter™) where the patient exhales to a tube connected to the monitor. This monitor can measure the level of total VSCs. Gas chromatography (Oral Chroma™) is a more recent method by which concentrations of the 3 VSCs can be quantified and also evaluated separately. Today, the second version of the OralChroma™ device (CHM-2) is the most widely used halitosis assessment device and offers more accurate VSCs measurements compared to the previous devices [15-17].

The patient exhale is imported to the device through a syringe and the compounds are compared and identified using a computer-based database [7,18]. According to the literature, the baseline level of total VSCs levels that determine halitosis is 150ppb (parts per billion; ppb) [18,19].

Interventions to control halitosis include either mechanical (tongue scrapers) or chemical methods (mouthwashes, chewing gums, toothpastes etc.) [20]. Recently different chemical agents have been used in the treatment of halitosis, including herbal oils, green tea, probiotics and plant extracts [21-23]. Chios' mastic (Pistacia Lentiscusvar. Chia) is the resinous secretion of the mastic tree (Pistacia Lentiscusvar. Chia). Several studies on the action of mastic and chewing gum of Chios' mastic have shown that it may reduce the formation of dental plaque, as well as inhibit bacterial growth in the oral cavity [24-26]. The effect of mastic mouthwash on orthodontic patients has not been previously studied. A randomized clinical trial was therefore planned to evaluate whether a common mastic mouthwash benefits halitosis and the impaired oral hygiene of orthodontic patients.

Specific objectives or hypotheses

The aim of this prospective, randomized, placebo-controlled, double-blind clinical study was to investigate the effect of Mastic mouthwash (Mastiha Mouthwash Gingivaction, Mastihashop®) on halitosis and plaque and gingival indexes in patients undergoing orthodontic treatment with fixed appliances. The research hypothesis was that the use of Mastic mouthwash during the orthodontic treatment did not affect the subjective perception of the oral malodor, the objective VSCs levels and the oral hygiene levels of the patients.

Materials and methods

Trial design

This trial was designed as a randomized, placebo-controlled, double blinded, superiority trial, with two parallel groups and a 1:1 allocation ratio. No changes to the methods occurred after trial commencement.

Participants, eligibility criteria, and setting

The study was conducted on patients undergoing orthodontic treatment with fixed appliances, treated by residents at the Department of Orthodontics. The duration of the study was two weeks and the following selection criteria were applied: aged 13 to 18 years old, with fixed conventional labial appliances on the maxillary and mandibular arch, brackets or bands at least on 24 teeth for more than 4 months before enrollment and estimated duration of the treatment more than 1 month, bands on the first molars, in extraction cases patients could be enrolled at least two months after the last extraction, good general health and total initial VSCs levels above the baseline level of 150ppb [18,19]. Patients with active caries, periodontitis, dental fluorosis / dysplasia of the teeth, syndromes or other abnormalities of the craniofacial complex, mental problems, subjects smoking or using other tobacco products [8], taking antibiotics during the last two months, use of chlorhexidine or another mouthwash in the last 3 weeks, allergy to mastic and participating in other trials were excluded [19]. 30 consecutive patients who visited the orthodontic treatment for their scheduled appointment and met the inclusion criteria were recruited at the Department of

Orthodontics, Dental School of Athens, NKUA. The principal investigator was calibrated for the measurement of the periodontal indices at the Postgraduate Clinic of the Department of Periodontology, NKUA. All measurements were conducted by the same investigator at the Postgraduate Clinic of the Department of Orthodontics, NKUA.

Interventions

All 30 patients were randomly assigned to either the mastic mouthwash group A (Art of Nature Mastiha Mouthwash, Mastishop, Greece) (n = 15) or the placebo mouthwash group B (from the same manufacturer) (n = 15) (Table I). All patients were asked to use the mouthwash twice a day (10 ml of mouthwash / 2 times a day for 30 sec for 14 days, every morning and every night after brushing) and to maintain their usual oral hygiene routine. The measurements were done in the morning and at least three hours after brushing and without the use of the mouthwash by the participant on the day of the assessments. Participants were also asked to abstain from eating odiferous foods 24 hours prior to the measurements. Modified plaque (PI-M) [27] and gingival index (GI) [27], VSCs levels and subjective odor using the questionnaires were assessed at baseline (T0) and after use of mouthwash for two weeks (T1).

Outcomes

The main variables measured were VSCs levels {hydrogen sulfide (H_2S), methylmercaptan (CH_3SH) and dimethyl sulfide [$(CH_3)_2S$]} with the OralChroma™ device (NOVATRONIC Deutschland GmbH, Kölner Straße 102, D-51429 Bergisch Gladbach)

(Figure 1), subjective malodor levels and oral hygiene through the modified plaque index (PI-M) and the gingival index (GI) [27].

The organoleptic evaluation was not performed due to the pandemic of the SARS-Covid 19 virus. The odor assessment was subjectively performed by the patient and scoring was based on a scale similar to the one used in organoleptic method (printed questionnaires) (Table II).

The objective assessment of the T0-T1 VSCs levels was done with the OralChroma™. This chromatograph measured the concentrations of the oral gases H₂S, CH₃SH and (CH₃)₂S. The sample was collected using disposable syringes (1ml plastic syringes), whose tip was inserted into the patient's oral cavity. The patients were asked to breathe with their mouth closed for 30 seconds. The samples were collected by pulling the plunger. Then the syringe's hub was inserted into the measuring device and 0.5ml of air was injected into the device.

Banded molars were excluded from the PI-M measurements since plaque detection was difficult at corresponding gingival margins. Silness & Loe plaque index (1964) [28] does not consider how the plaque is accumulated in orthodontic patients. To overcome this problem, a modification of the indexes was used in which the teeth were divided into mesial, distal, and incisal areas relative to the bracket, and plaque was graded in each area using values from 0 to 3 [29]. The values were summed to obtain an overall score, which ranged from 0 to 9 for each tooth. The sum of all teeth was divided by the surfaces measured and a mean score for each patient was obtained (Table III). This modified index has been suggested for patients with fixed orthodontic appliances because it evaluates the effect of these appliances on the plaque distribution and has a much higher categorical distinctive ability.

The measurements or the GI were done on the three areas of the buccal surface of each tooth (mesial, cervical and distal), as described above. The banded molars were also evaluated, and a mean score was calculated, as in the PI-M (Table IV).

There were no outcome changes after trial commencement.

Sample size calculation

The sample size was calculated based on a recent study which used as a mean expected difference of VSCs levels the value 50ppb, standard deviation 40, α -level at 5% and power 90%. According to the assumptions the required sample size was 14 patients per treatment arm, rounded up to a total of 30 patients (15 per group) [30].

Randomization (sequence generation, type, allocation concealment, implementation)

All patients were allocated at a 1:1 ratio between group A (mastic group) and group B (placebo group), for each sex separately using stratified randomization. Two random sequences of 15 letters (A or B) were obtained from www.random.org (List Randomizer service), one for males and one for females. Those letters were written on paper and then sealed in opaque envelopes, sequentially numbered from M1 to M15 for males and from F1 to F15 for females respectively. All envelopes were sealed, numbered and stored in a drawer by a person not involved in the study. Every patient enrolled in the study received an envelope in a numerical order and their name was written on the envelope. Informed consent was obtained from parents / legal guardians and written consent upon information and prior to the randomization or application of any procedure was obtained from the patients.

Blinding

All participants received mouthwashes whose packaging was identical and both participants and investigators were blinded to the distribution. A person not involved in the study was in charge of opening each envelope and providing the appropriate mouthwash to each participant.

Statistical analysis

Inter and intra observer error was evaluated for the VSCs measurements performing double measurements of some enrollees by another investigator and the principal investigator respectively. All data were statistically analyzed, using median regression analysis for all the variables except from the subjective odor where ordinal logistic regression analysis was used. Predictors were the treatment and the baseline value of the outcome. All analyses were conducted using Stata 17 (StataCorp, TX, USA).

Results

Participant flow

58 patients were assessed for eligibility until 30 patients who fulfilled all eligibility criteria were recruited. Patient recruitment commenced in May 2022 and ended in January 2023 (Figure 2).

Baseline data

Baseline data are depicted on Tables V and VI.

Number analyzed for each outcome

All 30 patients were analyzed for all outcomes.

Outcomes and estimation

The descriptive characteristics revealed a not-normally distributed sample. Intraclass correlation coefficients for inter- and intra-observer reliability indicated good (0.88) to excellent (0.97) results respectively. The differences between the groups were the following (median values): for the mastic group (group A) the total VSCs levels dropped from 245.00ppb to 152.00ppb, and more specifically H₂S dropped from 221.00ppb to 125.00ppb, CH₃SH dropped from 31.00ppb to 17.00ppb and (CH₃)₂S raised from 3.00 to 7.00ppb. For the placebo group (Group B) the total VSCs levels dropped from 264.00ppb to 249.00, and more specifically H₂S dropped from

230.00ppb to 220.00ppb, CH₃SH remained the same 17.00ppb and (CH₃)₂S dropped from 13.00 to 0.00ppb. The effect of treatment was statistically significant only for H₂S (Table VII). No differences were found between the subjective scores. The PI-M score (median) for group A dropped from 1.27 to 1.04 whereas for group B it dropped from 1.03 to 0.96. The GI score (median) for group A dropped from 1.28 to 1.15 whereas for group B it increased from 1.07 to 1.11. None of the changes differ statistically between treatment arms (Table VI).

Ancillary analyses

No ancillary analyses were performed.

Harms

No harms were observed from the use of the mouthwashes.

Discussion

Main findings in the context of the existing evidence and interpretation

The present study demonstrated a reduction of the oral H₂S levels of orthodontic patients after 2 weeks of mastic mouthwash use. According to the literature, the main VSC contributing to oral malodor is believed to be hydrogen sulfide (H₂S) and a recent study with OralChroma™, assessed only the level of this component [31]. Nevertheless, methyl mercaptan (CH₃SH) and dimethyl sulfide (CH₃)₂S may also play a secondary role [32-33]. The levels of these two VSCs changed in the present trial in both groups, however these differences did not reach statistical significance. A recent randomized controlled trial also evaluated the VSCs levels and halitosis after application of a tablet containing herbal formulation, including mastic. VSCs levels were significantly reduced in that study, however its configuration (halimetry) did not allow distinction between each VCS level [34].

Halitosis has been mainly attributed to bacterial activity [10-11]. Mastic extract's inhibition of both periodontal and cariogenic pathogens has been demonstrated in the literature [24-26]. In a randomized controlled study, which investigated the effect of a mastic mouthwash on dental plaque bacteria and subgingival microorganisms, the mean aerobic plaque bacteria count was significantly reduced for the mastic mouthwash group compared to the placebo group (p=0.001) [25].

Thus, mastic has been proposed as a promising alternative to the most widely used chlorhexidine (CHX) or hydrogen peroxide (H₂O₂) as an oral antibacterial agent [26].

Mastic extract has been reported to induce significantly increased inhibition of oral

pathogens when compared to H₂O₂, and comparable although lower inhibition when compared to CHX [26]. On the other hand, according to the same study, mastic showed beneficial effects on cell viability, as viability values of tested cells were significantly lower for the cells treated with CHX and H₂O₂ compared with mastic extract treated cells, and therefore mastic may constitute a useful antibacterial agent with minimal side effects [26].

The interventions in the present study did not change the periodontal parameters of the groups in a statistically significant way. Other studies comparing mouthwashes based on herbal extracts have also failed to report any significant alterations in periodontal indices [34-36]. Moreover, a recent systematic review and meta-analysis on the efficacy of propolis-based mouthwashes on dental plaque and inflammation failed to show any concrete results on the superiority of these mouthwashes on reducing periodontal indices [36]. High quality recent evidence indicated that the use of chlorhexidine mouthwashes may decrease the GI in individuals with mild gingival inflammation, however that reduction was not considered to be clinically significant [37]. According to the same study, a larger reduction in dental plaque is expected with chlorhexidine mouthwashes when used as an adjunct to mechanical oral hygiene [37]. In our study the patients were given no specific instructions on brushing. A systematic review and meta-analysis on the efficacy of curcumin versus chlorhexidine mouthwashes reported comparable reduction of dental plaque and gingival inflammation [35].

Limitations

The objective organoleptic assessment by a calibrated examiner is rather important, since most individuals are poor judges of their own breath [38], but unfortunately this assessment was not performed due to the Covid-19 pandemic. The subjective evaluation by the patient did not reveal any statistically significant differences between the groups, however, the age group may have influenced this measurement. Adolescents of the present sample may have underestimated their own oral malodor, since the need for social acceptance in this age group constitutes a priority [39].

Generalizability

The presented results were obtained from measurements taken by a single investigator in a single center and a certain age group, hence, affecting generalizability. The study population were adolescents and results may differ on adult population due to cooperation issues.

Conclusions

1. The evaluated mastic mouthwash may control halitosis in adolescents undergoing orthodontic treatment with fixed appliances after 2 weeks of usage. However only the H_2S {and not CH_3SH and $(CH_3)_2S$ } levels dropped during this time period.
2. The mastic mouthwash did not improve oral hygiene indices.
3. Subjective questionnaires on oral malodor may not be a useful tool for measuring halitosis levels in adolescent patients.

Registration

The trial was registered at ClinicalTrials.gov. Identifier: NCT05647369

Protocol

The protocol of the study has been compiled according to the SPIRIT Statement Protocol instructions and has been approved by the Ethics Committee of the School of Dentistry, National and Kapodistrian University of Athens (NKUA), Greece.

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Conflict of interest

None to declare.

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Tables

Table I. Main ingredients of the evaluated mouthwashes (w/w %).

| | Mastic water | Mastic oil | Mastic flavor | Deionized water | Sodium fluoride | Alcohol | Menthol |
|---------------------|--------------|------------|---------------|-----------------|-----------------|---------|---------|
| A. Mastic Mouthwash | 20 | 0,05 | 0,15 | 44,5 | 0,055 | 5 | 0,05 |
| B. Placebo | - | - | - | 64,7 | 0,055 | 5 | 0,05 |

Table II. Subjective scale of halitosis.

| | |
|---|--|
| 0 | Absence of halitosis |
| 1 | Almost noticeable halitosis |
| 2 | Slight, but clearly noticeable halitosis |
| 3 | Moderate halitosis |
| 4 | Severe halitosis |
| 5 | Extremely strong halitosis |

Table III. Plaque index²⁷.

| | |
|---|--|
| 0 | No plaque. |
| 1 | Thin plaque attached to the gingival margin and adjacent areas of the tooth. Plaque is only visible after applying a revealing solution or using a probe on the tooth surface. |
| 2 | Moderate accumulation of soft plaque deposits in the gingival sulcus or plaque on the gingival margin and adjacent areas of the tooth visible to the naked eye. |
| 3 | Abundant soft plaque deposits in the gingival sulcus or plaque on the gingival margin and adjacent areas of the tooth. |

Table IV. Gingival index²⁷.

| | |
|---|---|
| 0 | Normal gums. |
| 1 | Mild inflammation, slight change in color and distinct change in texture, no bleeding upon probing. |
| 2 | Moderate inflammation, moderate redness and swelling, bleeding upon probing. |
| 3 | Severe inflammation, visible swelling, ulceration, bleeding upon probing and/or spontaneously. |

Table V. VSCs levels for hydrogen sulfide (H₂S), methyl-mercaptan (CH₃SH) and dimethyl sulfide [(CH₃)₂S] at T0 and T1 for the mastic group (group A) and the placebo group (group B) in ppb (median values, interquartile range-IQR).

| | A: Mastic | | B: Placebo | |
|-------------------------|------------------|-------|-------------------|--------|
| | median | iqr | median | iqr |
| H2S_T0 | 221.00 | 71.00 | 230.00 | 155.00 |
| H2S_T1 | 125.00 | 80.00 | 220.00 | 109.00 |
| CH3SH_T0 | 31.00 | 18.00 | 17.00 | 21.00 |
| CH3SH_T1 | 17.00 | 16.00 | 17.00 | 17.00 |
| (CH3) ₂ S_T0 | 3.00 | 32.00 | 13.00 | 26.00 |
| (CH3) ₂ S_T1 | 7.00 | 29.00 | 0.00 | 20.00 |
| SUM_T0 | 245.00 | 62.00 | 264.00 | 191.00 |
| SUM_T1 | 152.00 | 78.00 | 249.00 | 112.00 |

Table VI. Subjective and periodontal indices scores at T0 and T1 for the mastic group (group A) and the placebo group (group B) (median values, interquartile range-IQR).

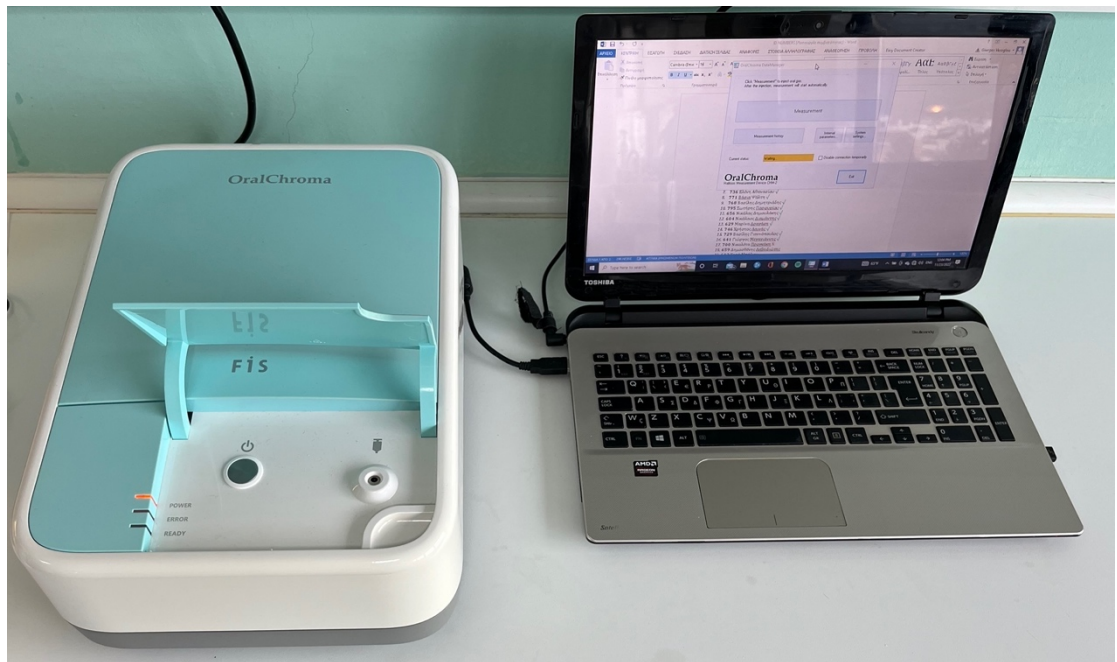
| | A: Mastic | | B: Placebo | |
|-----------|------------------|------|-------------------|------|
| | median | iqr | median | iqr |
| Sub_T0 | 1 | 2 | 1 | 1 |
| Sub_T1 | 1.00 | 1.00 | 1.00 | 0.00 |
| PImean_T0 | 1.27 | 0.61 | 1.03 | 0.42 |
| PImean_T1 | 1.04 | 0.38 | 0.96 | 0.38 |
| GImean_T0 | 1.28 | 0.61 | 1.07 | 0.31 |
| GImean_T1 | 1.15 | 0.26 | 1.11 | 0.30 |

Table VII. Statistical analysis results.

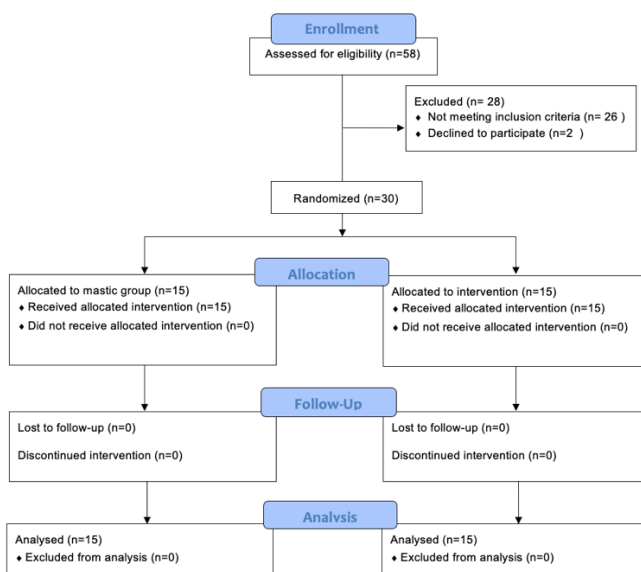
| | | Coef | 95% confidence interval | p-value |
|--------------------------------------|----------|-------------------|--------------------------------|----------------|
| TRX A | | | | |
| reference | | | | |
| H₂S | TRX B | 72.38 | 8.48, 136.28 | 0.03 |
| | Baseline | 0.61 | 0.26, 0.96 | 0.001 |
| (CH₃)₂S | TRX B | -0.52 | -7.10, 6.06 | 0.87 |
| | Baseline | 0.83 | 0.70, 0.95 | <0.001 |
| CH₃SH | TRX B | 1.94 | -19.15, 15.26 | 0.819 |
| | Baseline | 0.059 | -0.33, 0.45 | 0.762 |
| Sum | TRX B | 60.17 | -13.77, 134.12 | 0.11 |
| | Baseline | 0.71 | 0.37, 1.06 | <0.001 |
| | | Odds Ratio | 95% confidence interval | p-value |
| Subjective evaluation | TRX B | 0.49 | 0.09, 2.66 | 0.41 |
| | Baseline | 11.11 | 2.97, 41.56 | <0.001 |

Figures

1. The OralChroma™ device at the Orthodontic Department, Dental School of Athens, NKUA



2. Participant flow diagram



Appendix

Randomization via Random.org

males There were 20 items in your list. Here they are in random order:

A
A
A
B
B
B
B
A
B
A
B
B
A
B
A
A
A
B
B
A

IP: 195.134.98.196

Timestamp: 2021-11-24 08:55:56 UTC

females There were 20 items in your list. Here they are in random order:

A

A

B

B

B

B

A

A

B

B

A

B

A

A

A

B

B

A

B

A

IP: 195.134.98.196

Timestamp: 2021-11-24 09:22:55 UTC

Printed questionnaire and indexes assessment form

1. Κακοσμία/ Επίπεδα πτητικών ενώσεων θείου (VSCs)

| | H2S | CH3SH | CH3)2S | σύνολο |
|----|-----|-------|--------|--------|
| T0 | | | | |
| T1 | | | | |

2. Αριθμητική, Αναλογική και Λειτουργική αξιολόγηση της κακοσμίας

| | 0 απουσία κακοσμίας | 1 Σχεδόν αισθητή κακοσμία | 2 Ελαφρώς αλλά σαφώς αισθητή κακοσμία | 3 Μέτρια κακοσμία | 4 Έντονη κακοσμία | 5 Εξαιρετικά έντονη κακοσμία |
|----|------------------------|---------------------------------|--|----------------------|----------------------|------------------------------------|
| T0 | | | | | | |
| T1 | | | | | | |

3. Τροποποιημένος δείκτης πλάκας Silness & Løe (PI-M)

| |
|---|
| 0 Χωρίς πλάκα. |
| 1 Λεπτό υμένιο πλάκας προσκολλημένη στην ουλική παρυφή και στις όμορες περιοχές του δοντιού. Η πλάκα είναι εμφανής μόνο μετά την εφαρμογή αποκαλυπτικού διαλύματος ή τη χρήση ανιχνευτήρα στην επιφάνεια του δοντιού. |
| 2 Μέτρια συσσώρευση μαλακών εναποθέσεων πλάκας στην ουλοδοντική σχισμή ή πλάκα στην ουλική παρυφή και στις όμορες περιοχές του δοντιού ορατή με γυμνό μάτι. |
| 3 Άφρονες μαλακές εναποθέσεις πλάκας εντός της ουλοδοντικής σχισμής ή στην ουλική παρυφή και στις όμορες περιοχές του δοντιού. |

Η συνολική βαθμολογία κάθε δοντιού θα προκύπτει από το άθροισμα όλων των επιφανειών διαιρούμενο με τον συνολικό αριθμό των επιφανειών που μετρήθηκαν. Παρειακά. ΕΓΓΥΣ-ΚΟΠΤΙΚΑ-ΑΠΩ

| | 25 | 24 | 23 | 22 | 21 | 11 | 12 | 13 | 14 | 15 | ΣΥΝΟΛΟ |
|----|----|----|----|----|----|----|----|----|----|----|--------|
| T0 | | | | | | | | | | | |
| T1 | | | | | | | | | | | |
| | 35 | 34 | 33 | 32 | 31 | 41 | 42 | 43 | 44 | 45 | ΣΥΝΟΛΟ |
| T0 | | | | | | | | | | | |
| T1 | | | | | | | | | | | |

4. Δείκτης Φλεγμονής των ούλων (GI)

| |
|---|
| 0 Φυσιολογικά ούλα. |
| 1 Ήπια φλεγμονή, ελαφρά μεταβολή στο χρώμα και διακριτή μεταβολή στην υφή, καμία αιμορραγία κατά την εξέταση. |
| 2 Μέτρια φλεγμονή, μέτρια ερυθρότητα και οίδημα, αιμορραγία κατά την εξέταση. |
| 3 Σοβαρή φλεγμονή, εμφανής ερυθρότητα και οίδημα/διόγκωση, εξέλκωση, αιμορραγία κατά την εξέταση και/ή αυθόρμητα. |

ΠΑΡΕΙΑΚΑ. ΕΓΓΥΣ-ΑΥΧΕΝΙΚΑ-ΑΠΩ

| | 26 | 25 | 24 | 23 | 22 | 21 | 11 | 12 | 13 | 14 | 15 | 16 | ΣΥΝΟΛΟ |
|----|----|----|----|----|----|----|----|----|----|----|----|----|--------|
| T0 | | | | | | | | | | | | | |
| T1 | | | | | | | | | | | | | |
| | 36 | 35 | 34 | 33 | 32 | 21 | 41 | 42 | 43 | 44 | 45 | 46 | ΣΥΝΟΛΟ |
| T0 | | | | | | | | | | | | | |
| T1 | | | | | | | | | | | | | |

Ages

| Subject | Age, Months | Age | |
|---------|-------------|-------|--|
| F1 | 16, 0 | 16 | |
| F2 | 13, 10 | 13,83 | |
| F3 | 17, 3 | 17,25 | |
| F4 | 14, 4 | 14,33 | |
| F5 | 14, 6 | 14,5 | |
| F6 | 15, 4 | 15,33 | |
| F7 | 13, 6 | 13,5 | |
| F8 | 13, 1 | 13,08 | |
| F9 | 15, 2 | 15,16 | |
| F10 | 15, 0 | 15,0 | |
| F11 | 14, 8 | 14,66 | |
| F12 | 17, 4 | 17,33 | |
| F13 | 13, 6 | 13,5 | |
| F14 | 16, 10 | 16,83 | |
| F15 | 15, 4 | 15,33 | |
| M1 | 12, 5 | 12,42 | |
| M2 | 16, 3 | 16,25 | |
| M3 | 15, 9 | 15,75 | |
| M4 | 15, 11 | 15,92 | |
| M5 | 17, 10 | 17,83 | |
| M6 | 17, 10 | 17,23 | |
| M7 | 14, 10 | 14,83 | |
| M8 | 14, 6 | 14,5 | |
| M9 | 12, 8 | 12,66 | |
| M10 | 13, 5 | 13,42 | |
| M11 | 13, 3 | 13,25 | |
| M12 | 13, 7 | 13,58 | |
| M13 | 13, 7 | 13,58 | |
| M14 | 16, 8 | 16,66 | |
| M15 | 16, 1 | 16,08 | |

Raw data

| # | a or b | T0-H2S | T0-CH3SH | T0-CH3ZS | T0-SINOLO | T0-YPOKEIMI | T0-PH-SUJ | T0-MEAN PI | T0-GI-SUM | T0-MEAN GI | T1-H2S | T2-CBSSH | T2-CH3ZS | T1-SINOLO | T1-YPOKEIME | T1-PH-SUM | T1-MEAN PI | T1-GI-SUM | T1-MEAN GI |
|-----|--------|--------|----------|----------|-----------|-------------|-----------|------------|-----------|------------|--------|----------|----------|-----------|-------------|-----------|------------|-----------|------------|
| F1 | A | 169 | 62 | 51 | 282 | 1 | 76 | 1,267 | 92 | 1,277 | 103 | 12 | 37 | 152 | 1 | 57 | 0,95 | 85 | 1,18 |
| F2 | A | 85 | 37 | 32 | 154 | 3 | 67 | 1,116 | 101 | 1,402 | 63 | 14 | 9 | 86 | 1 | 55 | 0,916 | 89 | 1,236 |
| F3 | B | 258 | 6 | 0 | 264 | 1 | 45 | 0,833 | 66 | 1,031 | 237 | 12 | 0 | 249 | 1 | 46 | 0,852 | 68 | 1,062 |
| F4 | B | 187 | 17 | 0 | 204 | 1 | 64 | 1,067 | 86 | 1,194 | 213 | 12 | 0 | 225 | 1 | 63 | 1,05 | 85 | 1,18 |
| F5 | B | 241 | 24 | 16 | 281 | 2 | 42 | 0,7 | 55 | 0,763 | 220 | 4 | 6 | 230 | 1 | 39 | 0,65 | 62 | 0,861 |
| F6 | B | 247 | 35 | 17 | 299 | 1 | 55 | 1,018 | 101 | 1,53 | 223 | 27 | 21 | 271 | 1 | 52 | 0,963 | 93 | 1,409 |
| F7 | A | 161 | 8 | 0 | 169 | 2 | 108 | 2 | 87 | 1,318 | 99 | 18 | 29 | 106 | 2 | 77 | 1,426 | 77 | 1,166 |
| F8 | A | 240 | 31 | 6 | 277 | 1 | 49 | 1,02 | 46 | 1,766 | 213 | 48 | 11 | 272 | 2 | 47 | 0,979 | 52 | 0,866 |
| F9 | B | 437 | 115 | 37 | 589 | 1 | 67 | 1,396 | 96 | 1,6 | 339 | 102 | 20 | 461 | 1 | 64 | 1,333 | 96 | 1,6 |
| F10 | B | 138 | 7 | 13 | 158 | 0 | 44 | 0,733 | 70 | 0,972 | 148 | 4 | 0 | 152 | 0 | 46 | 0,767 | 70 | 0,972 |
| F11 | A | 185 | 32 | 28 | 245 | 1 | 49 | 0,816 | 62 | 0,861 | 105 | 13 | 17 | 135 | 1 | 42 | 0,7 | 59 | 0,819 |
| F12 | B | 230 | 21 | 0 | 251 | 1 | 48 | 0,8 | 48 | 0,66 | 257 | 17 | 0 | 274 | 1 | 48 | 0,8 | 51 | 0,708 |
| F13 | A | 307 | 32 | 6 | 345 | 3 | 83 | 1,383 | 88 | 1,222 | 125 | 18 | 7 | 150 | 2 | 66 | 1,1 | 90 | 1,25 |
| F14 | A | 221 | 21 | 3 | 245 | 1 | 62 | 1,148 | 75 | 1,136 | 118 | 28 | 0 | 146 | 1 | 56 | 1,037 | 71 | 1,075 |
| F15 | A | 207 | 22 | 3 | 232 | 1 | 58 | 1,074 | 75 | 1,136 | 183 | 27 | 3 | 213 | 1 | 52 | 0,962 | 74 | 1,121 |
| M1 | A | 121 | 33 | 66 | 220 | 3 | 93 | 1,55 | 137 | 1,903 | 65 | 0 | 72 | 137 | 3 | 78 | 1,3 | 139 | 1,93 |
| M2 | A | 175 | 6 | 0 | 181 | 3 | 105 | 1,75 | 102 | 1,417 | 180 | 17 | 0 | 197 | 2 | 65 | 1,083 | 80 | 1,111 |
| M3 | A | 353 | 37 | 3 | 393 | 3 | 78 | 1,625 | 142 | 2,367 | 137 | 16 | 7 | 160 | 2 | 62 | 1,292 | 117 | 1,95 |
| M4 | B | 210 | 13 | 0 | 223 | 2 | 73 | 1,217 | 82 | 1,139 | 186 | 0 | 0 | 186 | 1 | 66 | 1,1 | 84 | 1,17 |
| M5 | B | 129 | 14 | 42 | 185 | 3 | 38 | 0,704 | 48 | 0,727 | 181 | 15 | 81 | 277 | 2 | 37 | 0,685 | 53 | 0,803 |
| M6 | B | 390 | 28 | 26 | 444 | 3 | 63 | 1,05 | 62 | 0,886 | 384 | 69 | 18 | 471 | 3 | 81 | 1,35 | 81 | 1,157 |
| M7 | B | 112 | 17 | 46 | 175 | 2 | 48 | 0,8 | 81 | 1,125 | 103 | 24 | 38 | 165 | 2 | 52 | 0,87 | 86 | 1,194 |
| M8 | A | 380 | 15 | 120 | 515 | 1 | 113 | 1,883 | 126 | 1,75 | 355 | 8 | 106 | 469 | 1 | 104 | 1,733 | 114 | 1,583 |
| M9 | B | 298 | 65 | 13 | 376 | 1 | 62 | 1,033 | 77 | 1,069 | 325 | 18 | 7 | 350 | 1 | 61 | 1,017 | 80 | 1,111 |
| M10 | A | 227 | 31 | 0 | 258 | 0 | 43 | 0,717 | 56 | 0,778 | 115 | 12 | 7 | 134 | 0 | 45 | 0,75 | 62 | 0,861 |
| M11 | B | 442 | 17 | 0 | 459 | 1 | 77 | 1,283 | 84 | 1,167 | 237 | 20 | 0 | 257 | 1 | 55 | 0,917 | 80 | 1,111 |
| M12 | B | 229 | 37 | 0 | 266 | 2 | 63 | 1,105 | 62 | 0,898 | 75 | 62 | 0 | 137 | 0 | 71 | 1,246 | 61 | 0,884 |
| M13 | A | 232 | 3 | 0 | 235 | 2 | 46 | 0,767 | 76 | 1,055 | 169 | 36 | 0 | 205 | 2 | 43 | 0,717 | 71 | 0,986 |
| M14 | B | 143 | 16 | 0 | 159 | 1 | 84 | 1,4 | 82 | 1,389 | 127 | 10 | 0 | 137 | 1 | 71 | 1,183 | 80 | 1,111 |
| M15 | A | 222 | 15 | 0 | 237 | 1 | 84 | 1,4 | 92 | 1,278 | 213 | 65 | 0 | 278 | 1 | 76 | 1,267 | 83 | 1,153 |

id
(unlabeled)

Type: String (str3)
Unique values: 30 Missing "": 0/30
Examples: "F14"
 "F6"
 "M11"
 "M3"

h2s_t0
H2S_t0

Type: Numeric (int)
Range: [85,442] Units: 1
Unique values: 30 Missing .: 0/30
Mean: 232.533
Std. dev.: 93.2571
Percentiles: 10% 25% 50% 75% 90%
 125 169 224.5 258 385

ch3sh_t0
CH3SH_t0

Type: Numeric (int)
Range: [3,115] Units: 1
Unique values: 21 Missing .: 0/30
Mean: 27.2333
Std. dev.: 22.2008
Percentiles: 10% 25% 50% 75% 90%
 6.5 15 21.5 33 49.5

ch32s_t0
CH32S_t0

Type: Numeric (int)
Range: [0,120] Units: 1
Unique values: 15 Missing .: 0/30
Mean: 17.6
Std. dev.: 26.768
Percentiles: 10% 25% 50% 75% 90%
 0 0 4.5 28 48.5

sinolo_t0
SINOLO_t0

Type: Numeric (int)
Range: [154,589] Units: 1
Unique values: 29 Missing .: 0/30
Mean: 277.367
Std. dev.: 109.328
Percentiles: 10% 25% 50% 75% 90%
164 204 248 299 451.5

subjective_t0
(unlabeled)

Type: Numeric (byte)
Range: [0,3] Units: 1
Unique values: 4 Missing .: 0/30
Tabulation: Freq. Value
2 0
15 1
6 2
7 3

pi_m_sum_t0
PI_M_SUM_t0

Type: Numeric (int)
Range: [38,113] Units: 1
Unique values: 24 Missing .: 0/30
Mean: 66.2333
Std. dev.: 20.5555
Percentiles: 10% 25% 50% 75% 90%
43.5 48 63 78 99

mean_pi_t0
MEAN_PI_t0

Type: Numeric (float)
Range: [.7,2] Units: .001
Unique values: 28 Missing .: 0/30
Mean: 1.15517
Std. dev.: .358189
Percentiles: 10% 25% 50% 75% 90%
.725 .816 1.0895 1.396 1.6875

gi_sum_t0
GI_SUM_t0

```

-----
-----
Type: Numeric (int)
Range: [46,142]
Unique values: 23
Units: 1
Missing .: 0/30
Mean: 81.9
Std. dev.: 24.1637
Percentiles: 10% 25% 50% 75% 90%
              51.5 62 81.5 92 114
-----

```

```

-----
mean_gi_t0
MEAN_GI_t0
-----

```

```

-----
Type: Numeric (float)
Range: [.66,2.367]
Unique values: 29
Units: .001
Missing .: 0/30
Mean: 1.2272
Std. dev.: .380661
Percentiles: 10% 25% 50% 75% 90%
              .7705 .972 1.153 1.402 1.758
-----

```

```

-----
h2s_t1
H2S_t1
-----

```

```

-----
Type: Numeric (int)
Range: [59,384]
Unique values: 26
Units: 1
Missing .: 0/30
Mean: 181.933
Std. dev.: 88.0015
Percentiles: 10% 25% 50% 75% 90%
              70 115 180.5 223 332
-----

```

```

-----
ch3sh_t1
CH3SH_t1
-----

```

```

-----
Type: Numeric (int)
Range: [0,102]
Unique values: 21
Units: 1
Missing .: 0/30
Mean: 24.2667
Std. dev.: 23.159
Percentiles: 10% 25% 50% 75% 90%
              4 12 17 27 63.5
-----

```

```

-----
ch32s_t1
CH32S_t1
-----

```

```

Type: Numeric (int)
Range: [0,106]           Units: 1
Unique values: 16       Missing .: 0/30

Mean: 16.5333
Std. dev.: 26.478

Percentiles:   10%   25%   50%   75%   90%
                0     0     7     20    55

```

```

-----
-----
sinolo_t1
SINOLO_t1
-----
-----

```

```

Type: Numeric (int)
Range: [86,471]        Units: 1
Unique values: 27     Missing .: 0/30

Mean: 222.733
Std. dev.: 103.62

Percentiles:   10%   25%   50%   75%   90%
                134.5 146   201   272   405.5

```

```

-----
-----
subjective_t1
(unlabeled)
-----
-----

```

```

Type: Numeric (byte)
Range: [0,3]           Units: 1
Unique values: 4       Missing .: 0/30

Tabulation: Freq. Value
              3  0
              17  1
               8  2
               2  3

```

```

-----
-----
pi_m_sum_t1
PI_M_SUM_t1
-----
-----

```

```

Type: Numeric (int)
Range: [37,104]       Units: 1
Unique values: 24     Missing .: 0/30

Mean: 59.2333
Std. dev.: 14.8293

Percentiles:   10%   25%   50%   75%   90%
                42.5   47   56.5   66   77.5

```

```

-----
-----
mean_pi_t1
MEAN_PI_t1
-----
-----

```

```

Type: Numeric (float)

```

Range: [.65,1.733] Units: .001
 Unique values: 29 Missing .: 0/30

 Mean: 1.03317
 Std. dev.: .255819

 Percentiles: 10% 25% 50% 75% 90%
 .7085 .852 .998 1.246 1.3415

 gi_sum_t1
 GI_SUM_t1

Type: Numeric (int)

 Range: [51,139] Units: 1
 Unique values: 24 Missing .: 0/30

 Mean: 79.7667
 Std. dev.: 19.4558

 Percentiles: 10% 25% 50% 75% 90%
 56 68 80 86 105

 mean_gi_t1
 MEAN_GI_t1

Type: Numeric (float)

 Range: [.708,1.95] Units: .001
 Unique values: 25 Missing .: 0/30

 Mean: 1.154
 Std. dev.: .296502

 Percentiles: 10% 25% 50% 75% 90%
 .84 .972 1.116 1.194 1.5915

 trx
 (unlabeled)

Type: Numeric (long)
 Label: treat

 Range: [1,2] Units: 1
 Unique values: 2 Missing .: 0/30

 Tabulation: Freq. Numeric Label
 15 1 A
 15 2 B

Tabulated data per variable and treatment group

```
tabstat h2s_t* ch3sh_t* ch32s_t* sinolo_t* subjective_t* pi_m_sum_t* mean_pi_t*
gi_sum_t* mean_gi_t*,by(trx) stat(mean sd p50 iqr) nottotal format(%4.2f)
```

| tr x | | h2s_t 0 | h2s_t 1 | ch3sh_t 0 | ch3sh_t 1 | ch32s_t 0 | ch32s_t 1 | sinolo~ 0 | sinolo~ 1 |
|---------|------------|------------|------------|--------------|--------------|--------------|--------------|--------------|--------------|
| A | mean | 219.00 | 146.87 | 25.67 | 22.13 | 21.20 | 20.33 | 265.87 | 189.33 |
| | sd | 79.72 | 76.77 | 15.22 | 16.69 | 34.35 | 30.56 | 92.56 | 94.80 |
| | media n | 221.00 | 125.00 | 31.00 | 17.00 | 3.00 | 7.00 | 245.00 | 152.00 |
| | iqr | 71.00 | 80.00 | 18.00 | 16.00 | 32.00 | 29.00 | 62.00 | 78.00 |
| B | | 246.07 | 217.00 | 28.80 | 26.40 | 14.00 | 12.73 | 288.87 | 256.13 |
| | | 106.15 | 86.68 | 28.00 | 28.68 | 16.62 | 22.08 | 126.13 | 104.23 |
| | | 230.00 | 220.00 | 17.00 | 17.00 | 13.00 | 0.00 | 264.00 | 249.00 |
| | | 155.00 | 109.00 | 21.00 | 17.00 | 26.00 | 20.00 | 191.00 | 112.00 |

| tr x | subjec ~1 | pi_m_s ~0 | pi_m_s ~1 | mean_p ~0 | mean_p ~1 | gi_sum ~0 | gi_sum ~1 | mean_g ~0 | mean_g ~1 |
|---------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|--------------|
| A | 1.47 | 74.27 | 61.67 | 1.30 | 1.08 | 90.47 | 84.20 | 1.38 | 1.22 |
| | 0.74 | 23.37 | 16.80 | 0.40 | 0.28 | 28.05 | 23.47 | 0.42 | 0.35 |
| | 1.00 | 76.00 | 57.00 | 1.27 | 1.04 | 88.00 | 80.00 | 1.28 | 1.15 |
| | 1.00 | 44.00 | 29.00 | 0.61 | 0.38 | 27.00 | 19.00 | 0.61 | 0.26 |
| B | 1.13 | 58.20 | 56.80 | 1.01 | 0.99 | 73.33 | 75.33 | 1.08 | 1.09 |
| | 0.74 | 13.82 | 12.68 | 0.24 | 0.22 | 16.29 | 13.82 | 0.28 | 0.23 |
| | 1.00 | 62.00 | 55.00 | 1.03 | 0.96 | 77.00 | 80.00 | 1.07 | 1.11 |
| | 0.00 | 22.00 | 20.00 | 0.42 | 0.38 | 22.00 | 23.00 | 0.31 | 0.30 |

```
tab subjective_t0 trx,col chi2
```

| subjective _t0 | trx | | Total |
|-------------------|--------|--------|--------|
| | A | B | |
| 0 | 1 | 1 | 2 |
| | 6.67 | 6.67 | 6.67 |
| 1 | 7 | 8 | 15 |
| | 46.67 | 53.33 | 50.00 |
| 2 | 2 | 4 | 6 |
| | 13.33 | 26.67 | 20.00 |
| 3 | 5 | 2 | 7 |
| | 33.33 | 13.33 | 23.33 |
| Total | 15 | 15 | 30 |
| | 100.00 | 100.00 | 100.00 |

Pearson chi2(3) = 2.0190 Pr = 0.568

median regression using as predictor the treatment and adjusting for the baseline value of the variable.

qreg h2s_t1 i.trx h2s_t0,base

| h2s_t1 | Coefficient | Std. err. | t | P> t | [95% conf. interval] | |
|--------|-------------|-----------|-------|-------|----------------------|----------|
| trx | | | | | | |
| A | 0 | (base) | | | | |
| B | 72.37895 | 31.14186 | 2.32 | 0.028 | 8.481133 | 136.2768 |
| h2s_t0 | .6105263 | .1698222 | 3.60 | 0.001 | .2620799 | .9589727 |
| _cons | -.1789474 | 43.09894 | -0.00 | 0.997 | -88.61067 | 88.25278 |

. qreg ch32s_t1 i.trx ch32s_t0 ,base

Median regression
 Raw sum of deviations 232 (about 7) Number of obs = 30
 Min sum of deviations 96.56522 Pseudo R2 = 0.5838

| ch32s_t1 | Coefficient | Std. err. | t | P> t | [95% conf. interval] | |
|----------|-------------|-----------|-------|-------|----------------------|----------|
| trx | | | | | | |
| A | 0 | (base) | | | | |
| B | -.5217391 | 3.209474 | -0.16 | 0.872 | -7.107036 | 6.063558 |
| ch32s_t0 | .826087 | .0609748 | 13.55 | 0.000 | .7009771 | .9511968 |
| _cons | .5217391 | 2.593256 | 0.20 | 0.842 | -4.799182 | 5.84266 |

qreg ch3sh_t1 i.trx ch3sh_t0 ,base

| ch3sh_t1 | Coefficient | Std. err. | t | P> t | [95% conf. interval] | |
|----------|-------------|-----------|-------|-------|----------------------|----------|
| trx | | | | | | |
| A | 0 | (base) | | | | |
| B | -1.941176 | 8.387588 | -0.23 | 0.819 | -19.15109 | 15.26873 |
| ch3sh_t0 | .0588235 | .1921323 | 0.31 | 0.762 | -.3353994 | .4530465 |
| _cons | 16.11765 | 7.701511 | 2.09 | 0.046 | .3154513 | 31.91984 |

qreg sinolo_t1 i.trx sinolo_t0,base

| sinolo_t1 | Coefficient | Std. err. | t | P> t | [95% conf. interval] | |
|-----------|-------------|-----------|-------|-------|----------------------|----------|
| trx | | | | | | |
| A | 0 | (base) | | | | |
| B | 60.17391 | 36.03738 | 1.67 | 0.107 | -13.76868 | 134.1165 |
| sinolo_t0 | .7149758 | .1676313 | 4.27 | 0.000 | .3710248 | 1.058927 |
| _cons | -20.29469 | 51.2658 | -0.40 | 0.695 | -125.4834 | 84.89406 |

Ordinal logistic regression

```
. ologit subjective_t1 i.trx subjective_t0,base
```

| subjective_t1 | Coefficient | Std. err. | z | P> z | [95% conf. interval] | |
|---------------|-------------|-----------|-------|-------|----------------------|----------|
| ----- | | | | | | |
| trx | | | | | | |
| A | 0 (base) | | | | | |
| B | -.7085721 | .8600137 | -0.82 | 0.410 | -2.394168 | .9770238 |
| subjective_t0 | 2.407784 | .6731534 | 3.58 | 0.000 | 1.088427 | 3.72714 |
| ----- | | | | | | |
| /cut1 | -.0613279 | 1.042323 | | | -2.104242 | 1.981587 |
| /cut2 | 4.551288 | 1.36833 | | | 1.869411 | 7.233166 |
| /cut3 | 7.996936 | 2.007927 | | | 4.061472 | 11.9324 |
| ----- | | | | | | |

Intraclass correlations

```
Intraclass correlations
One-way random-effects model
Absolute agreement
```

```
Random effects: id                Number of targets =      5
                                   Number of raters   =      2
```

| h2s | ICC | [95% conf. interval] | |
|------------|----------|----------------------|----------|
| Individual | .8839996 | .3746817 | .9869359 |
| Average | .9384286 | .5451178 | .993425 |

```
F test that
ICC=0.00: F(4.0, 5.0) = 16.24                Prob > F = 0.005
```

Note: ICCs estimate correlations between individual measurements and between average measurements made on the same target.

```
Intraclass correlations
One-way random-effects model
Absolute agreement
```

```
Random effects: id                Number of targets =      5
                                   Number of raters   =      2
```

| ch3sh | ICC | [95% conf. interval] | |
|------------|----------|----------------------|----------|
| Individual | .9475305 | .6679992 | .9942625 |
| Average | .9730584 | .8009587 | .997123 |

```
F test that
ICC=0.00: F(4.0, 5.0) = 37.12                Prob > F = 0.001
```

Note: ICCs estimate correlations between individual measurements and between average measurements made on the same target.

Intraclass correlations
One-way random-effects model
Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

```

-----+-----
           ch32s |          ICC      [95% conf. interval]
-----+-----
      Individual |    .8783111    .3525996    .9862584
      Average   |    .9352136    .5213658    .9930817
-----+-----

```

F test that
ICC=0.00: F(4.0, 5.0) = 15.44 Prob > F = 0.005

Note: ICCs estimate correlations between individual measurements
and between average measurements made on the same target.

Intraclass correlations
One-way random-effects model
Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

```

-----+-----
           sinolo |          ICC      [95% conf. interval]
-----+-----
      Individual |    .9872699    .9096257    .9986328
      Average   |    .9935942    .9526743    .9993159
-----+-----

```

F test that
ICC=0.00: F(4.0, 5.0) = 156.11 Prob > F = 0.000

Note: ICCs estimate correlations between individual measurements
and between average measurements made on the same target.

```

.   foreach myvar of varlist h2s ch3sh ch32s sinolo {
.   2.   icc `myvar' id if var7=="intra"
.   3.   }

```

Intraclass correlations
One-way random-effects model
Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

```

-----+-----
           h2s |          ICC      [95% conf. interval]
-----+-----
      Individual |    .9762723    .8370517    .9974391
      Average   |    .9879937    .911299    .9987179
-----+-----

```

F test that
ICC=0.00: F(4.0, 5.0) = 83.29 Prob > F = 0.000

Note: ICCs estimate correlations between individual measurements
and between average measurements made on the same target.

Intraclass correlations
 One-way random-effects model
 Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

| ch3sh | ICC | [95% conf. interval] | |
|------------|----------|----------------------|----------|
| Individual | .8931922 | .4116312 | .988023 |
| Average | .9435832 | .5831993 | .9939754 |

F test that
 ICC=0.00: F(4.0, 5.0) = 17.73 Prob > F = 0.004

Note: ICCs estimate correlations between individual measurements
 and between average measurements made on the same target.

Intraclass correlations
 One-way random-effects model
 Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

| ch32s | ICC | [95% conf. interval] | |
|------------|----------|----------------------|----------|
| Individual | .9666619 | .777404 | .9963861 |
| Average | .9830484 | .8747634 | .9981898 |

F test that
 ICC=0.00: F(4.0, 5.0) = 58.99 Prob > F = 0.000

Note: ICCs estimate correlations between individual measurements
 and between average measurements made on the same target.

Intraclass correlations
 One-way random-effects model
 Absolute agreement

Random effects: id Number of targets = 5
 Number of raters = 2

| sinolo | ICC | [95% conf. interval] | |
|------------|----------|----------------------|----------|
| Individual | .9977884 | .9837754 | .9997636 |
| Average | .998893 | .9918213 | .9998818 |

F test that
 ICC=0.00: F(4.0, 5.0) = 903.31 Prob > F = 0.000

Note: ICCs estimate correlations between individual measurements
 and between average measurements made on the same target.