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Anti Microbial Activity of Chitosan Nanoparticles with Chlorhexidine- An In vitro Study

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ABSTRACT

Introduction: Irrigants also play a crucial role in removing debris and smear layer from the root canal walls, in addition to antimicrobial activity which allows for better adhesion and penetration of root canal sealers and obturation materials (1). The most commonly used irrigants in endodontic treatment include sodium hypochlorite, chlorhexidine, and ethylenediaminetetraacetic acid (EDTA) [6]. However, each of these irrigants has its own limitations and potential side effects, such as cytotoxicity, allergic reactions, and dentin erosion (2). Therefore, the search for alternative irrigants that possess better antimicrobial activity and fewer side effects is ongoing in the field of endodontics.

Materials and Methods: The antimicrobial activity of the synthesised nano chitosan with chlorhexidine and Plain Chitosan with Chlorhexidine was evaluated using the agar well diffusion technique. Mueller Hinton agar plates were prepared and sterilised using an autoclave at 121°C for 15-20 minutes. After sterilisation, the medium was poured on to the surface of sterile Petri plates and allowed to cool to room temperature. The bacterial suspension (E.faecalis) was spread evenly onto the agar plates using sterile cotton swabs. The wells were then filled with different concentrations of nanoparticles and plain chitosan solution. An antibiotic (e.g., Bacteria-Amoxyrite) was used as a standard. The plates were incubated at 37°C for 24 hours and 48 hours for bacterial cultures.

Results: Nanochitosan with chlorhexidine shows higher antimicrobial activity when compared to plain chitosan .Its activity increases with increase in dosage. 10μ l shows maximum antimicrobial efficacy. Increase in the time period showed increased antimicrobial efficacy. Antimicrobial efficacy at 10μ l is comparable to positive control (sodium hypochlorite)

Conclusion: The irrigant nanochitosan with chlorhexidine showed better antibacterial efficacy than sodium hypochlorite and it can be used as an irrigant in endodontics. The several known advantages of this irrigant such as naturally available, non cytotoxic, biocompatible and low cost make it a good replacement of sodium hypochlorite as an irrigant.

Keywords: Endodontic Irrigants, Chitosan, Chitosan nanoparticles, Natural Irrigant, Antibacterial Activity, Biocompatibility, E. feacalis, Root Canal Treatment

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INTRODUCTION

Irrigants also play a crucial role in removing debris and smear layer from the root canal walls, in addition to antimicrobial activity which allows for better adhesion and penetration of root canal sealers and obturation materials (1). The most commonly used irrigants in endodontic treatment include sodium hypochlorite, chlorhexidine, and ethylenediaminetetraacetic acid (EDTA). However, each of these irrigants has its own limitations and potential side effects, such as cytotoxicity, allergic reactions, and dentin erosion (2). Therefore, the search for alternative irrigants that possess better antimicrobial activity and fewer side effects is ongoing in the field of endodontics.

NaOCl is a commonly used irrigant solution in root canal therapy, known for its unpleasant taste. Despite its toxicity, it is still widely utilised for disinfecting root canals in many parts of the world (3–5). Typically, NaOCl is employed at concentrations ranging from 0.5% to 6.0%. It is valued for its ability to dissolve tissue and its antimicrobial properties (6,7). However, there are several issues associated with its use.

One challenge is the requirement for freshly prepared NaOCl to ensure optimal antimicrobial activity (8,9). Unfortunately, in many cases, NaOCl is purchased in large containers and stored at room temperature, leading to prolonged exposure to oxygen. This exposure can significantly diminish its effectiveness.Furthermore, the accidental extrusion of NaOCl into periapical tissues can result in severe injury to the patient (10,11).

An alternative irrigant solution to NaOCl is chlorhexidine (CHX), which has been utilised for caries prevention for the past 50 years (12). It is also commonly employed in periodontal. CHX possesses a broad-spectrum antibacterial action, sustained effectiveness, and lower toxicity compared to NaOCl (13). These favourable characteristics have led to its occasional use as a root canal irrigant (14). One notable advantage of chlorhexidine over NaOCl is its lesser cytotoxicity, making it safer for use in endodontic procedures. Furthermore, it does not have the foul smell and unpleasant taste associated with NaOCl (15). However, similar to NaOCl, chlorhexidine is not able to eliminate all bacteria and does not effectively remove the smear layer (16).

Despite advancements in root canal treatment, the failure rate has remained relatively high, ranging from 18% to 26% over the past 50 years. One of the reasons for this is the current techniques' inability to effectively address the entire disease process and effectively eradicate bacterial biofilms within infected root canals. Consequently, researchers are exploring more advanced disinfection techniques and irrigants (17).Numerous studies have been conducted to evaluate new irrigants with the objective of finding solutions that are both more effective in their disinfection properties and less irritating to periapical tissues compared to NaOCl. These studies have explored various natural substances such as herbal solutions, Propolis, Chitosan (18,19), as well as antibacterial nanoparticles These alternative substances are (20, 21).believed to possess comparable antibacterial efficacy to NaOCl while exhibiting lower toxicity and reduced irritation.

One of the naturally occurring polysaccharide is chitosan that is derived from the shells of crustaceans. It is characterised by its non-toxic, biodegradable and biocompatible properties. In the field of endodontics, chitosan has gained attention due to its broad-spectrum antimicrobial activity and significant chelating effects (22). Nanoparticles, on the other hand, exhibit enhanced antimicrobial activity due to their polycationic/polyanionic nature, along with their charge density and high surface area. These characteristics allow for increased interaction with bacterial cells, resulting in improved antimicrobial efficacy (23). As a result, chitosan nanoparticles (CNPs) have been utilised in various healthcare domains, including root canal therapy (24).

Numerous reports have demonstrated the favourable biocompatibility of chitosan and its derivative materials (25–28). Specifically, Seung-Yun Shin and colleagues have highlighted the excellent biocompatibility of chitosan at the nanometer scale (29,30). However, studies have shown variable antimicrobial activity of chitosan against Gram-positive and Gram-negative bacteria. Chitosan offers several advantages, including antibacterial its effects. biocompatibility, non-toxicity, biodegradability, and chelating potential. Nevertheless, its ability to penetrate is inferior to that of chlorhexidine (CHX), and at lower concentrations, it may not be equally effective compared to other irrigants.

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Nano-sized chitosan materials are anticipated to exhibit enhanced penetration capabilities and improved disruption of bacterial cell membranes (31). Therefore, nano-chitosan is expected to be more effective against a wide range of organisms. The combination of nano chitosan with chlorhexidine is shown to have synergism and increases the bacterial cell penetration and the antibacterial activity. Hence, the purpose of this study was to assess the antibacterial effect of nanochitosan with chlorhexidine compared to those of NaOCl as an irrigant.

MATERIALS AND METHODS Chitosan Synthesis

For this study the chitosan powder was obtained from dried exoskeleton of marine shrimps.

Preparation of Chitosan Nanoparticles

To prepare a solution of chitosan for use in a coating process,the dissolution mixture (500 mg of chitosan and 50 ml of 1% acetic acid solution) is stirred to get a clear solution at room temperature (1000 rpm for 25 minutes). To achieve a neutral pH of 5,the prepared solution was sonicated and titrated by adding either NaOH or HCl. The solution was then filtered using a 0.2 μ mesh. For the coating process, a solution of 5 ml of nano-magnetic solution was added to 75 mL of deionized water and sonicated for 10 minutes.The nanoparticle solution is further sonicated for 5 mis until a clear solution is obtained.

Preparation of Nanochitosan with Chlorhexidine solution

50 ml of 2% Chlorhexidiene was added to 50 ml of the prepared nano chitosan solution. The resulting solution was sonicated for 10 mins until the solution was clear.

Preparation of plain chitosan nanoparticles with chlorhexidine

To prepare a solution of chitosan and chlorhexidine, the dissolution mixture (500 mg of chitosan and 50 ml of 1% acetic acid solution) is stirred to get a clear solution at room temperature (1000 rpm for 25 minutes). The prepared solution was titrated and sonicated by adding either NaOH or HCl solution until a pH of 5 was achieved. The solution was then filtered using a 0.2 μ mesh. Next, 50 ml of 2% chlorhexidine was added to 50 ml of the prepared chitosan solution, and the resulting solution was sonicated for 10 minutes until it became clear.

Antimicrobial activity

The antimicrobial activity of the synthesised Chitosan nanoparticles with Chlorhexidine and Plain Chitosan with Chlorhexidine was evaluated using the agar well diffusion technique. Mueller Hinton agar plates were prepared and sterilised using an autoclave at 121oC for 15-20 minutes. After sterilisation, the medium was poured on to the surface of sterile Petri plates and allowed to cool to room temperature. The bacterial suspension (E feacalis) was spread evenly onto the agar plates using sterile cotton swabs. Wells of 9mm diameter were created in the agar plates using a sterile polystyrene tip. The wells were then filled with different concentrations (25 μ g, 50 µg, 100 µg) of NPs and plain chitosan solution. An antibiotic (e.g Bacteria-Amoxyrite) was used as a standard. The plates were incubated at 37°C for 24 hours and 48 hours for bacterial cultures. The antimicrobial activity was evaluated by measuring the diameter of the inhibition zone surrounding the wells. The diameter of the zone of inhibition was measured using a ruler and recorded in millimetres (mm) and the zone of inhibition was calculated.

RESULTS



FIGURE 1: Agar Plates at different dilutions show growth of E. Faecalis. MBC for nano chitosan with chlorhexidine is at the concentration of 10⁻³.

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FIGURE 2: Agar Plates at different dilutions show growth of E. Faecalis. MBC for plain chitosan with chlorhexidine is at the concentration of 10⁻².



GRAPH 1: Graph represents anti microbial efficacy of nano chitosan with chlorhexidine at different dilutions. 10µl shows maximum antimicrobial efficacy. Increase in the time period showed increased antimicrobial efficacy. Antimicrobial efficacy at 10µl is comparable to positive control (sodium hypochlorite)





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DISCUSSION

The process of mechanically preparing a root canal involves getting rid of any tissues, whether they are living or dead, in order to eliminate any infection in the pulp space. However, due to the complex anatomy of the root canal system, there may be hidden areas that are difficult to reach with traditional endodontic instruments. Thus, chemical disinfection is necessary to supplement mechanical preparation, resulting in what is known as chemo-mechanical preparation (32).

NaOCl remains the preferred and widely used irrigating solution in the field of Endodontics, considered as the gold standard. Therefore, in the present study, it was chosen as a reference for comparison. Specifically, a concentration of 5.25% NaOCl was utilised because previous research demonstrated that only this particular concentration was effective in completely eliminating Enterococcus faecalis, a highly resilient microorganism commonly found in endodontic infections. In contrast, lower concentrations of 1.3% and 2.5% were found to be inadequate in achieving the same level of eradication (33).

The study incorporated a 2% concentration of CHX (chlorhexidine) as a root canal irrigating solution due to its extensive antimicrobial properties and ability to remain active for an extended period of time. Additionally, CHX addresses the limitations associated with the use of NaOCl (34,35). Furthermore, the study utilised CNPs (calcium nanoparticles) with a size range of 50 ± 5 nm at a concentration of 3%. It has been proposed that a 3% solution of CNPs exhibits a positive bactericidal effect as a root canal irrigant against Enterococcus faecalis, and this effect is comparable to that of a 2.5% NaOCl solution (25).

Furthermore, previous research has indicated that CNPs with an average size of 97 nm possess potent bactericidal properties against both Gramnegative and Gram-positive bacteria (26). Based on this information, the study aimed to investigate the potential of CNPs as a carrier for delivering CHX into dentinal tubules. Previous studies have demonstrated that the antimicrobial efficacy of CNPs can be enhanced by loading them with other antimicrobial agents (19,22). Therefore, in this study, a combination of 2% CHX and 3% CNPs was employed to explore the synergistic effects and the ability of CNPs to facilitate the delivery of CHX into the dentinal tubules.

There are several theories explaining the antibacterial action of chitosan. One such theory is the contact-mediated killing theory, which suggests that chitosan, with its positive charge, interacts with the phosphoryl group present in the bacterial cell membrane. This interaction leads to an increase in membrane permeability, causing proteins and cellular components to leak out and ultimately resulting in bacterial cell death (36). Additionally, chitosan, being a chelating agent, has been proposed to inhibit bacterial growth through metal chelation. By binding to metal ions, chitosan reduces the activity of certain enzymes necessary for bacterial survival, thereby impeding bacterial growth. At the nanoscale, CNPs have the ability to enter bacterial cells and bind to their DNA. This interaction hinders the transport of RNA, which is essential for protein synthesis, thereby disrupting bacterial processes. Additionally, CNPs can impede enzymatic degradation, which is the mechanism by which bacteria penetrate into dentinal tubules. By blocking this process, CNPs contribute to inhibiting bacterial invasion into the dentinal tubules (37).

The study's results indicated that 3% NaOCl demonstrated significantly а stronger antibacterial effect against bacteria compared to 2% CHX. This finding is consistent with the research conducted by Agrawal et al. (30) and Arias et al. (38). However, it contradicts the findings of Rocas et al, who reported no significant difference in effectiveness between the two solutions. It is important to note that this discrepancy could be attributed to the variation in NaOCl concentration used in the different studies. The NaOCl concentration utilised in the current study (3%) was higher compared to the concentration (2.5%) employed in the studies by Rocas et al. (39,40). NaOCl exerts its antibacterial effects through multiple mechanisms. Firstly, the hydroxyl ions released by NaOCl act to destroy bacterial cell membranes and nucleic acids. Additionally, the high pH of NaOCl leads to the denaturation of bacterial proteins (39). Furthermore, the chloride ions released by NaOCl play a significant role in its antimicrobial activity as they dissolve organic materials, including bacterial biofilms (40,41).

On the contrary, the mode of action of CHX involves interfering with the bacterial cell walls

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by attaching to proteins containing phosphate. This attachment weakens the cell wall, making it more susceptible to damage. Once inside the bacterial cells. CHX forms irreversible compounds with bacterial ATP and DNA, disrupting their normal functions. Consequently, these actions lead to the demise of the bacterial cells. (40). Our team has extensive knowledge and research experience that has translated into high quality publications (42-51)). The combination chitosan with chlorhexidine shows substantivity and it synergistically increases the efficacy of the irrigant. The results of the present study show that nano chitosan with chlorhexidine showed better antimicrobial activity when compared to sodium hypochlorite.

CONCLUSION

The irrigant nanochitosan with chlorhexidine showed better antibacterial efficacy than sodium hypochlorite and it can be used as an irrigant in endodontics. The several known advantages of this irrigant such as naturally available, non cytotoxic, biocompatible and low cost make it a good replacement of sodium hypochlorite as an irrigant.

REFERENCES

- 1. Buldur B, Kapdan A. Comparison of the Antimicrobial Efficacy of the EndoVac System and Conventional Needle Irrigation in Primary Molar Root Canals. J Clin Pediatr Dent. 2017;41(4):284–8.
- Pashley EL, Birdsong NL, Bowman K, Pashley DH. Cytotoxic effects of NaOCl on vital tissue. J Endod. 1985 Dec;11(12):525–8.
- 3. Zehnder M, Kosicki D, Luder H, Sener B, Waltimo T. Tissue-dissolving capacity and antibacterial effect of buffered and unbuffered hypochlorite solutions. Oral Surg Oral Med Oral Pathol Oral Radiol Endod. 2002 Dec;94(6):756–62.
- 4. Beltz RE, Torabinejad M, Pouresmail M. Quantitative analysis of the solubilizing action of MTAD, sodium hypochlorite, and EDTA on bovine pulp and dentin. J Endod. 2003 May;29(5):334–7.
- 5. Naenni N, Thoma K, Zehnder M. Soft tissue dissolution capacity of currently used and potential endodontic irrigants. J Endod. 2004 Nov;30(11):785–7.
- 6. Siqueira JF Jr, Magalhães KM, Rôças IN. Bacterial reduction in infected root canals treated with 2.5% NaOCl as an irrigant and calcium hydroxide/camphorated

paramonochlorophenol paste as an intracanal dressing. J Endod. 2007 Jun;33(6):667–72.

- 7. Virtej A, MacKenzie CR, Raab WHM, Pfeffer K, Barthel CR. Determination of the performance of various root canal disinfection methods after in situ carriage. J Endod. 2007 Aug;33(8):926–9.
- 8. Clarkson RM, Moule AJ, Podlich HM. The shelf-life of sodium hypochlorite irrigating solutions. Aust Dent J. 2001 Dec;46(4):269–76.
- Fabian TM, Walker SE. Stability of sodium hypochlorite solutions. Am J Hosp Pharm. 1982 Jun;39(6):1016–7.
- Hülsmann M, Hahn W. Complications during root canal irrigation--literature review and case reports. Int Endod J. 2000 May;33(3):186–93.
- 11. Reeh ES, Messer HH. Long-term paresthesia following inadvertent forcing of sodium hypochlorite through perforation in maxillary incisor. Endod Dent Traumatol. 1989 Aug;5(4):200–3.
- Lee LW, Lan WH, Wang GY. [A evaluation of chlorhexidine as an endosonic irrigan]. J Formos Med Assoc. 1990 Jun;89(6):491–7.
- 13. Southard SR, Drisko CL, Killoy WJ, Cobb CM, Tira DE. The effect of 2% chlorhexidine digluconate irrigation on clinical parameters and the level of Bacteroides gingivalis in periodontal pockets. J Periodontol. 1989 Jun;60(6):302–9.
- Torabinejad M, Walton RE, Fouad A. Endodontics - E-Book: Principles and Practice. Elsevier Health Sciences; 2014. 496 p.
- 15. Fedorowicz Z, Sequeira P. Efficacy of sodium hypochlorite and chlorhexidine against Enterococcus faecalis--a systematic review. J Appl Oral Sci. 2009 May-Jun;17(3):ii.
- 16. Shabahang S, Aslanyan J, Torabinejad M. The substitution of chlorhexidine for doxycycline in MTAD: the antibacterial efficacy against a strain of Enterococcus faecalis. J Endod. 2008 Mar;34(3):288–90.
- Afkhami F, Forghan P, Gutmann JL, Kishen A. Silver Nanoparticles and Their Therapeutic Applications in Endodontics: A Narrative Review. Pharmaceutics [Internet]. 2023 Feb 21;15(3). Available from: http://dx.doi.org/10.3390/pharmaceutics15030 715
- Betancourt P, Brocal N, Sans-Serramitjana E, Zaror C. Functionalized Nanoparticles Activated by Photodynamic Therapy as an Antimicrobial Strategy in Endodontics: A Scoping Review. Antibiotics (Basel) [Internet]. 2021 Sep 2;10(9). Available from: http://dx.doi.org/10.3390/antibiotics10091064
- 19. Raura N, Garg A, Arora A, Roma M. Nanoparticle technology and its implications in endodontics: a review. Biomater Res. 2020 Dec 4;24(1):21.

J Popul Ther Clin Pharmacol Vol 30(14):e41–e48; 06 May 2023. This article is distributed under the terms of the Creative Commons Attribution-Non

- Skoskiewicz-Malinowska K, Kaczmarek U, Malicka B, Walczak K, Zietek M. Application of Chitosan and Propolis in Endodontic Treatment: A Review. Mini Rev Med Chem. 2017;17(5):410–34.
- Kishen A. Nanotechnology in Endodontics: Current and Potential Clinical Applications. Springer; 2015. 199 p.
- 22. DaSilva L, Finer Y, Friedman S, Basrani B, Kishen A. Biofilm formation within the interface of bovine root dentin treated with conjugated chitosan and sealer containing chitosan nanoparticles. J Endod. 2013 Feb;39(2):249–53.
- 23. Kishen A, Shi Z, Shrestha A, Neoh KG. An investigation on the antibacterial and antibiofilm efficacy of cationic nanoparticulates for root canal disinfection. J Endod. 2008 Dec;34(12):1515–20.
- 24. Wu D, Fan W, Kishen A, Gutmann JL, Fan B. Evaluation of the antibacterial efficacy of silver nanoparticles against Enterococcus faecalis biofilm. J Endod. 2014 Feb;40(2):285–90.
- 25. Roshdy NN, Kataia EM, Helmy NA. Assessment of antibacterial activity of 2.5% NaOCl, chitosan nano-particles against contaminating root canals with and without diode laser irradiation: an study. Acta Odontol Scand. 2019 Jan;77(1):39–43.
- Jana S, Jana S. Functional Chitosan: Drug Delivery and Biomedical Applications. Springer Nature; 2020. 489 p.
- 27. Gupta A. Chitosan Nanoparticles. Arcler Press; 2017.
- 28. Pereira P. Chitosan Nanoparticles for Biomedical Applications. 2010. 76 p.
- 29. Goud S, Aravelli S, Dronamraju S, Cherukuri G, Morishetty P. Comparative Evaluation of the Antibacterial Efficacy of Aloe Vera, 3% Sodium Hypochlorite, and 2% Chlorhexidine Gluconate Against Enterococcus faecalis: An In Vitro Study. Cureus. 2018 Oct 22;10(10):e3480.
- Agrawal V, Rao MR, Dhingra K, Gopal VR, Mohapatra A, Mohapatra A. An in vitro comparison of antimicrobial effcacy of three root canal irrigants-BioPure MTAD, 2% chlorhexidine gluconate and 5.25% sodium hypochlorite as a final rinse against E. faecalis. J Contemp Dent Pract. 2013 Sep 1;14(5):842– 7.
- 31. Del Carpio-Perochena A, Kishen A, Felitti R, Bhagirath AY, Medapati MR, Lai C, et al. Antibacterial Properties of Chitosan Nanoparticles and Propolis Associated with Calcium Hydroxide against Single- and Multispecies Biofilms: An In Vitro and In Situ Study. J Endod. 2017 Aug;43(8):1332–6.
- 32. De Deus G, Silva EJN, Souza E, Versiani MA, Zuolo M. Shaping for Cleaning the Root

Canals: A Clinical-Based Strategy. Springer Nature; 2021. 376 p.

- Retamozo B, Shabahang S, Johnson N, Aprecio RM, Torabinejad M. Minimum contact time and concentration of sodium hypochlorite required to eliminate Enterococcus faecalis. J Endod. 2010 Mar;36(3):520–3.
- Kesar S, Bhatti MS. Chlorination of secondary treated wastewater with sodium hypochlorite (NaOCl): An effective single alternate to other disinfectants. Heliyon. 2022 Nov;8(11):e11162.
- 35. Ravinanthanan M, Hegde MN, Shetty V, Kumari S, Al Qahtani FN. A Comparative Evaluation of Antimicrobial Efficacy of Novel Surfactant-Based Endodontic Irrigant Regimen's on. Contemp Clin Dent. 2022 Sep 24;13(3):205–10.
- 36. Del Carpio-Perochena A, Bramante CM, Duarte MAH, de Moura MR, Aouada FA, Kishen A. Chelating and antibacterial properties of chitosan nanoparticles on dentin. Restor Dent Endod. 2015 Aug;40(3):195–201.
- Hong L, Luo SH, Yu CH, Xie Y, Xia MY, Chen GY, et al. Functional Nanomaterials and Their Potential Applications in Antibacterial Therapy. Pharm Nanotechnol. 2019;7(2):129– 46.
- 38. Arias-Moliz MT, Ordinola-Zapata R, Baca P, Ruiz-Linares M, García García E, Hungaro Duarte MA, et al. Antimicrobial activity of Chlorhexidine, Peracetic acid and Sodium hypochlorite/etidronate irrigant solutions against Enterococcus faecalis biofilms. Int Endod J. 2015 Dec;48(12):1188–93.
- Darcey J, Jawad S, Taylor C, Roudsari RV, Hunter M. Modern Endodontic Principles Part
 4: Irrigation. Dent Update. 2016 Jan-Feb;43(1):20–2, 25–6, 28–30 passim.
- 40. Rôças IN, Provenzano JC, Neves MAS, Siqueira JF Jr. Disinfecting Effects of Rotary Instrumentation with Either 2.5% Sodium Hypochlorite or 2% Chlorhexidine as the Main Irrigant: A Randomized Clinical Study. J Endod. 2016 Jun;42(6):943–7.
- 41. Del Carpio-Perochena AE, Bramante CM, Duarte MAH, Cavenago BC, Villas-Boas MH, Graeff MS, et al. Biofilm dissolution and cleaning ability of different irrigant solutions on intraorally infected dentin. J Endod. 2011 Aug;37(8):1134–8.
- 42. Neelakantan P, Grotra D, Sharma S. Retreatability of 2 mineral trioxide aggregatebased root canal sealers: a cone-beam computed tomography analysis. J Endod. 2013 Jul;39(7):893–6.
- 43. Aldhuwayhi S, Mallineni SK, Sakhamuri S, Thakare AA, Mallineni S, Sajja R, et al. Covid-19 Knowledge and Perceptions Among Dental Specialists: A Cross-Sectional Online

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Questionnaire Survey. Risk Manag Healthc Policy. 2021 Jul 7;14:2851–61.

- 44. Sheriff KAH, Ahmed Hilal Sheriff K, Santhanam A. Knowledge and Awareness towards Oral Biopsy among Students of Saveetha Dental College [Internet]. Vol. 11, Research Journal of Pharmacy and Technology. 2018. p. 543. Available from: http://dx.doi.org/10.5958/0974-360x.2018.00101.4
- 45. Markov A, Thangavelu L, Aravindhan S, Zekiy AO, Jarahian M, Chartrand MS, et al. Mesenchymal stem/stromal cells as a valuable source for the treatment of immune-mediated disorders. Stem Cell Res Ther. 2021 Mar 18;12(1):192.
- 46. Jayaraj G, Ramani P, Herald J. Sherlin, Premkumar P, Anuja N. Inter-observer agreement in grading oral epithelial dysplasia – A systematic review [Internet]. Vol. 27, Journal of Oral and Maxillofacial Surgery, Medicine, and Pathology. 2015. p. 112–6. Available from: http://dx.doi.org/10.1016/j.ajoms.2014.01.006
- Paramasivam A, Priyadharsini JV, Raghunandhakumar S, Elumalai P. A novel COVID-19 and its effects on cardiovascular disease. Hypertens Res. 2020 Jul;43(7):729–30.
- 48. Li Z, Veeraraghavan VP, Mohan SK, Bolla SR, Lakshmanan H, Kumaran S, et al. Apoptotic induction and anti-metastatic activity of eugenol encapsulated chitosan nanopolymer on rat glioma C6 cells via alleviating the MMP signaling pathway [Internet]. Vol. 203, Journal of Photochemistry and Photobiology B: Biology. 2020. p. 111773. Available from: http://dx.doi.org/10.1016/j.jphotobiol.2019.11 1773
- 49. Gan H, Zhang Y, Zhou Q, Zheng L, Xie X, Veeraraghavan VP, et al. Zingerone induced caspase-dependent apoptosis in MCF-7 cells and prevents 7,12-dimethylbenz(a)anthraceneinduced mammary carcinogenesis in experimental rats. J Biochem Mol Toxicol. 2019 Oct;33(10):e22387.
- Dua K, Wadhwa R, Singhvi G, Rapalli V, Shukla SD, Shastri MD, et al. The potential of siRNA based drug delivery in respiratory disorders: Recent advances and progress. Drug Dev Res. 2019 Sep;80(6):714–30.
- 51. Mohan M, Jagannathan N. Oral field cancerization: an update on current concepts. Oncol Rev. 2014 Mar 17;8(1):244.