Abstract

**Title**: An assessment of the effectiveness of Andolex-C® mouth rinse on oral palliation in HIV-infected patients.

**Background**: The majority of HIV-infected patients present with oral lesions associated with the disease. HIV-infected patients experience profound disorders like oral infections and ulcerations, discomfort and greater levels of social impact than non-HIV patients as a result of oral lesions. Studies have indicated that mouth pain is a significant symptom reported by HIV-infected patients. In order to relieve pain and discomfort and improve quality of life, management of HIV-infected patients should include relief of mouth pain, discomfort as well as the social and psychological distress caused by the oral lesions.

**Objectives**: To determine the prevalence of oral lesions associated with HIV among a cohort of HIV-infected patients. To assess the effectiveness of Andolex-C® mouth rinse on oral palliation in HIV-infected patients.

**Methods**: The intervention of Andolex C® mouth rinse plus a proven preventive oral hygiene regimen was compared to an established oral hygiene intervention. Two hundred and ninety nine patients were randomly assigned into Groups 1 and 2. Patients in Group 1 were given toothbrushes and toothpaste and oral hygiene instruction ‘routine oral hygiene package’. Those in Group 2 received Andolex-C® mouth rinse in addition to the ‘routine oral hygiene package’ given to the first group. A baseline assessment of mouth pain and/or discomfort was done via a clinical examination and an assessment of quality of life was done using the Oral Health Impact Profile (OHIP) questionnaire. The intervention was carried out over a four week period after which a follow-up assessment was done using the same tools. Comparison of baseline versus post-treatment scores was performed to determine impact of intervention in both groups.

**Results**: The prevalence of combined candidal lesions was 71.6% of which Pseudomembranous candidiasis was 43.2%. Erythematous candidiasis and angular cheilitis were the next commonly seen, each with an equal prevalence of 14.2 %.

Group 2 (Andolex-C® mouth rinse) showed a statistically significant improvement in quality of life on all subscales related to functioning, pain, psychological and social aspects when using the OHIP index. The patients demonstrated substantial reduction of
[64%] of mouth pain and/or discomfort and a 73% reduction of oral lesions compared to Group 1 where there was a much smaller [22%] reduction of mouth pain and/or discomfort and a 40% reduction of the oral lesions.

**Conclusion:** Andolex-C® mouth rinse improved the quality of life of HIV-infected patients who presented with mouth pain and/or discomfort and demonstrated that in combination with proper oral care and good hygiene habits, this regimen could be recommended for oral palliation in HIV positive patients.