

GINGIVAL HYPERPLASIA

- Patient instructed to follow strict home **care oral hygiene** measures with **tooth brushing and flossing twice daily** ^[1]
- The most effective treatment of drug-related gingival enlargement is **withdrawal or substitution** of medication. When possible, **reducing the dose** or changing to another drug may bring about partial or complete regression of the lesion. ^[3]
- Use of **azithromycin for managing cyclosporin-influenced gingival enlargement** is a useful alternative or adjunct to surgical management. (**Azithromycin** inhibits cyclosporine influenced fibroblast proliferation, collagen accumulation, and mRNA level of Type I collagen) suppression of protein synthesis of **both gram positive and gram-negative organisms**. ^[1]
- patients who **received Tac because of CsA intolerance** such as **gum hyperplasia were improved in all cases**, and a significant improvement in lipid disorders was noted ^[2]

[1] -Kumar, S. S., Mohammad, H., & Kar, K. (n.d.). *Management of Cyclosporine-Influenced Gingival Enlargement with Azithromycin*. <https://doi.org/10.1902/cap.10097>

(<https://pubmed.ncbi.nlm.nih.gov/32074404/>)

[2] -Cantarovich, D., Renou, M., Megnigbeto, A., Giral-Classe, M., Hourmant, M., Dantal, J., Blanco, G., Karam, G., & Soulillou, J. P. (2005). Switching from cyclosporine to tacrolimus in patients with chronic transplant dysfunction or cyclosporine-induced adverse events. *Transplantation*, 79(1), 72–78.

<https://doi.org/10.1097/01.TP.0000148917.96653.E9>

(<https://pubmed.ncbi.nlm.nih.gov/15714172/>)

[3] -Ponnaiyan D, Jegadeesan V. Cyclosporine A: Novel concepts in its role in drug-induced gingival overgrowth. *Dent Res J (Isfahan)*. 2015;12(6):499-506. doi:10.4103/1735-3327.170546

<https://www.ncbi.nlm.nih.gov/pmc/articles/PMC4696350/>

