Septilin in minor oral surgical procedures and dental infections (Pilot Study)

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Septilin has been used successfully in otorhinolaryngologic infections, rhinosinal infections, allergic rhinitis, respiratory and other infections (Lakshmipathi, 1962; sheth et al, 1959; Cooper, R.A.F., 1958; and Merchant, N.R.). It inhibits the growth of micro-organisms causing the upper respiratory tract infections (Behl and Pradhan). Although antibiotics have a very important role in the practice of dental surgery, they have some adverse reactions in the human system. This prompted us to try the indigenous preparation Septilin (The Himalaya Drug Co.) in minor oral surgical procedures and dental infections, where *staphylococci* and *streptococci* were the two important causative organisms.

**COMPOSITION**

Each tablet of Septilin contains:

- Balsamodendron mukul 0.162 g
- Maharasnadi quath 65 mg
- Ext. Phyllanthus emblica 16 mg
- Tinospora cordifolia 49 mg
- Rubia cordifolia 32 mg
- Moringa pterygosperma 16 mg
- Pristimera indica 6 mg
- Shankh bhasma 32 mg

Septilin has anti-inflammatory, antiexudative and sterilising effect on the organisms of acute rhinosinusitis.

**MATERIAL AND METHODS**

Forty patients undergoing minor oral surgical procedures and having dental infections were studied at the Out-patient Department of the Dental College and Hospital, King George’s Medical College, Lucknow. Patients sensitive to antibiotics were also included in the study and care was taken that these patients did not suffer from haematological, hepatic and renal dysfunction. Relevant history was elicited and the required treatment was carried out. Septilin 2 tablets t.i.d. were administered from 3 to 10 days, as required. Patients were asked to report for follow up on the first, second, fourth, sixth, tenth and fourteenth day of treatment. They were assessed similarly regarding the symptoms of pain and swelling. Septilin was given to all patients along with B-Complex tablet once a day and one tablet of aspirin grain five, in case of pain only. Average age and sex of the patients in each of the groups were recorded (Table I). So also the progress of swelling and pain in the number of patients on the first, second fourth, sixth, tenth and fourteenth day were recorded (Table II). The clinical evaluation was based on patients’ responses and our critical observations. No laboratory investigations like routine blood examinations, bacterial swabs and culture were necessary.
The results clearly show that there was subjective improvement with marked decrease in swellings and pain. It is clear from Table II that, of the 30 patients who had extraction of carious exposed teeth with alveolar abscesses, by the fourth post-treatment day, only seven patients had pain and six had swelling; and by the sixth day, no complaint of pain or swelling were observed. All cases of apicectomy experienced pain and swelling even on the second day but on the fourth day, there was no pain but some swelling was present in all the cases. By the sixth day neither pain nor swelling were observed. Pain and swelling in pericoronitis and in cases of impacted lower third molars disappeared after the fourth day. The symptoms also disappeared in a solitary case each of transplantation of tooth and vestibuloplasty by the tenth and sixth day respectively. There were no untoward effects in any of the cases except one who felt weakness and drying of throat, which disappeared on discontinuing the drug.

**SUMMARY**

1. Septilin tablets 2 t.i.d. were tried in 40 cases of various dental and oral surgical procedures and dental infections for 3 to 10 days and the response was observed.
2. Pain and swelling disappeared quickly within a few days and the response was good in all cases.
3. There were no toxic or untoward effects on administration of Septilin. One case showed drying of the mouth.
4. The drug is economical, convenient to administer and safe in dental practice.