

Original article

Does sleeping cycle affect the periodontal health?

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ABSTRACT

Objective: The study is for the correlation among sleep duration, sleep time, and periodontitis among population and the mediation effect of WBC.

Methods: Total number of 80 sample size is selected for this study (age 30 to 55 years). Patients were questioned about the duration and timing of sleep. For WBCs counts venous blood collected from forearm-antecubital vein. For the periodontal evaluation Community Periodontal Index (introduced by the World Health Organization in 1997) was selected.

Results: Result of this study shows that those who were going to bed for daytime are higher rated periodontitis. Long-time sleep (more than 9 hours) were suffering from severe periodontitis as compared to others. P value < 0.001, P value obtained by Chi-Square.

Conclusions: The study's finding suggest that an extra-long sleep duration and going to bed during the daytime are correlated with periodontitis.

INTRODUCTION

Sleep is increasingly recognized as a critical component of healthy development and overall health. Healthy sleep comprises many dimensions, including adequate duration, good quality, appropriate timing, and the absence of sleep disorders. Not getting enough sleep at night is generally associated with daytime sleepiness, daytime fatigue, depressed mood, poor daytime functioning and so on. Sleep and inflammation mediators are closely linked. If the quality of sleep is disturbed then the levels of inflammatory cytokines will be increased in saliva as well as blood. Most important cytokines involved in it are IL-1, TNF α , IL-6, IL-21 etc. The significant correlation between clinical periodontal parameters and salivary cytokines is founded between clinical attachment level (CAL) and IL-21. In periodontitis, neutrophils are initially predominant cells of host defense mechanism, and have a significant role in inflammation and pathogenesis. White blood cells (WBCs), an immune indicator, plays a vital role as a mediator. Leukocytes, especially neutrophils, produce a specific molecule being directly responsible for the inflammatory response.

OBJECTIVE

The objective of this study is to investigate the relationship between sleep time & duration with periodontitis and white blood cells (WBC) as a mediator.

METHODOLOGY

For this study, selected sample size number are 80 (age 30 to 55 years). Patients are to be questioned about the duration and timing of sleep. Venous blood is to be collected from forearm-antecubital vein. For measuring periodontal status, Community Periodontal Index (introduced by the World Health Organization in 1997) was selected



(a)

(b)

Fig: (a) blood collection from forearm (antecubital vein), (b) CPI by WHO-CPI probe

Exclusion criteria:

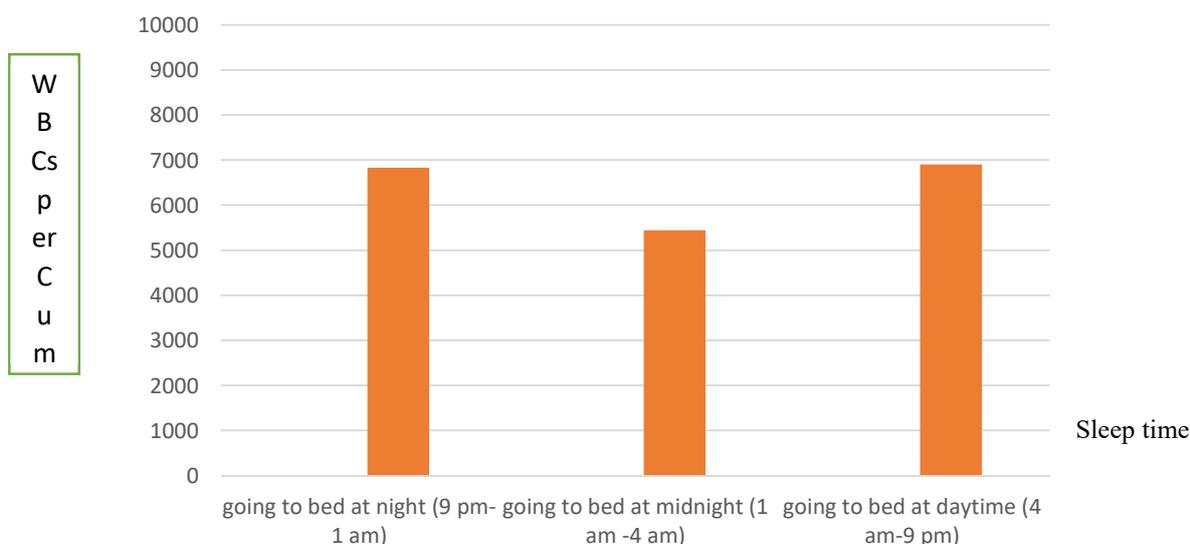
- (1) History of any major health (2) Sleep disorders (3) Patients under medications like anti-anxiety and (4) anti-depressants (5) Current smokers.

RESULTS

1.White blood cells (WBCs) count by sleep time

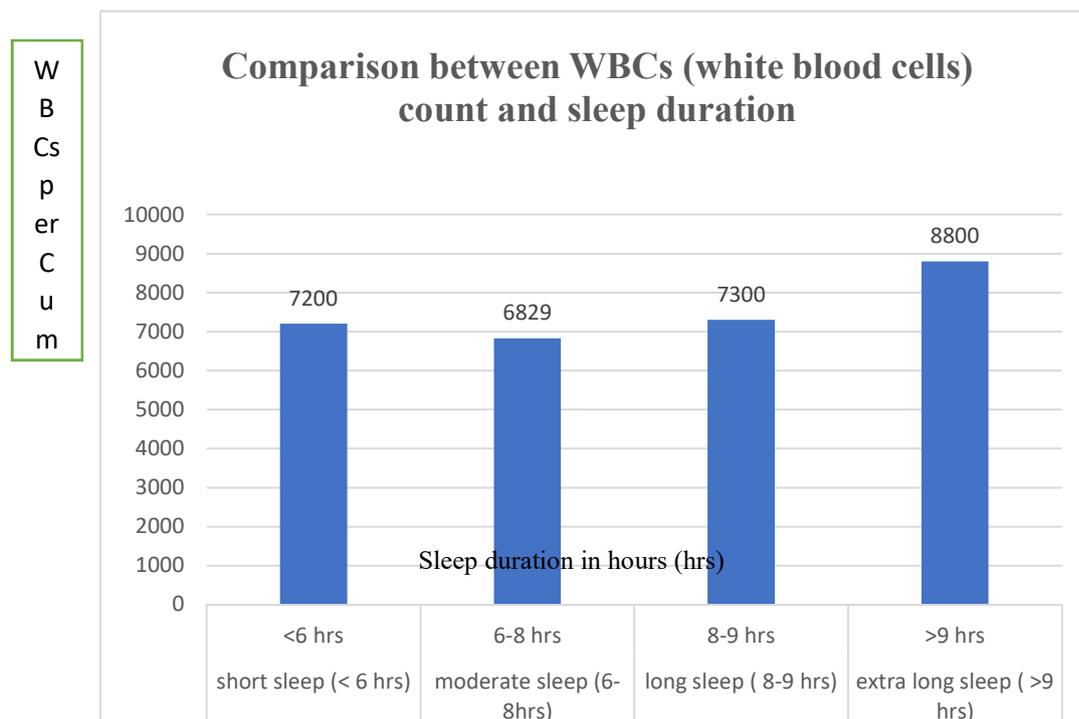
SLEEP TIME	NUMBER OF PATIENTS	WBCS COUNT MEAN \pm SD
going to bed at night (9 pm- 1 am)	58	6831 \pm 200
going to bed at midnight (1 am -4 am)	16	5443 \pm 126
going to bed at daytime (4 am-9 pm)	6	6900 \pm 180

Comparison between WBCs (white blood cells) count and sleep time



2. White blood cells (WBCs) count by sleep duration

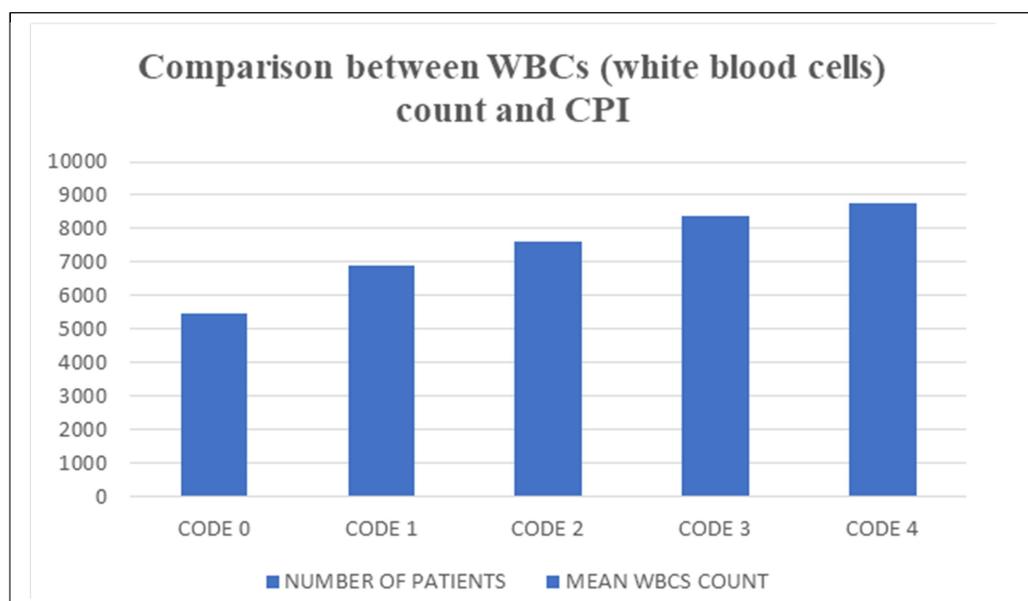
SLEEP DURATION	TIME IN HRS	WBCS COUNT MEAN \pm SD
short	<6 hrs	7200 \pm 987
moderate	6-8 hrs	6829 \pm 400
long	8-9 hrs	7300 \pm 308
extra long	>9 hrs	8800 \pm 104



3. White blood cells (WBCs) count vs CPI score

COMMUNITY PERIODONTAL INDEX	NUMBER OF PATIENTS	WBCS COUNT MEAN \pm SD
CODE 0	5	5465 \pm 414
CODE 1	11	6887 \pm 566
CODE 2	26	7601 \pm 578
CODE 3	21	8397 \pm 200
CODE 4	17	8754 \pm 182

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Community periodontal index (CPI)

$P < 0.001$, P values obtained by Chi-Square

DISCUSSION

- As for the studies on the relationship between sleep duration and health outcome are inconsistent.
- According to result of this study (table no.1) shows that those who were going for sleep in a day time has higher in count of WBCs cell (6900 ± 180 per cubic millimeter) as compared to those who were going for sleep at night (6831 ± 180 per cubic millimeter) , an article shows same result is Han DH and their colleague.
- Table no. 2 shows that those who were long sleeping time(more than 9 hrs), they have slight more number of white blood cells (8800 per cubic millimeter) as compared to short time of sleep (7000 per cubic millimeter). The study regarding this is done by Hoopes EK and their colleague.
- Table no.3 shows that community periodontal index (CPI) is directly proportional to white blood cells (WBCs). The white blood cells count was higher (8754 per cubic millimeter) in high score of community periodontal index (CODE 4). The article Kumar BP and their colleague shows same result.
- Kerenyi NA (1990) in his study found that melatonin production is always highest at night and disturbance of melatonin secretion because of night awakening and light exposure might cause periodontal inflammation through immune dysfunction.
- Kowalik K et al (2001) conducted a study on patients of periodontitis and have found significant higher level of leukocytes in them as compare to control group which is in parallel with the result of present study.
- Dong et al (2020) results show that the WBC count played a role in explaining the relationship between sleep time and periodontitis which is in the result of my study.

CONCLUSION

Collectively, the association between sleep (duration and time) and periodontitis was proven. Extra-long sleep duration (> 9 hours) and going to bed during the daytime with awakening during the night may be considered independent risk indicators of periodontal disease.

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