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Efficacy of Autologous Platelet Concentrates in the Treatment of Oral Mucosal Lesions: A Review

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Abstract: Oral mucosal lesions present a diverse array of clinical challenges, ranging from discomfort to potential malignancy. Conventional treatment modalities often exhibit limitations in efficacy and adverse effects. Autologous platelet concentrates (APCs), a promising regenerative therapy, have garnered attention for their potential in oral lesion management. This review systematically evaluates the efficacy of APCs in treating various oral mucosal lesions. A comprehensive search of relevant databases yielded studies investigating APCs' therapeutic effects on conditions such as oral ulcers, lichen planus, and oral submucous fibrosis. Results indicate that APC therapy demonstrates considerable potential in promoting wound healing, reducing pain, and ameliorating inflammation associated with oral mucosal lesions. Mechanistic insights suggest that APCs exert their therapeutic effects through the release of growth factors, cytokines, and other bioactive molecules, facilitating tissue regeneration and immune modulation. Despite promising outcomes, further well-designed clinical trials are warranted to elucidate optimal treatment protocols, standardize preparation techniques, and assess longterm outcomes. Nonetheless, the findings underscore the potential of APCs as a valuable adjunctive therapy in the management of oral mucosal lesions, offering clinicians a promising avenue towards improved patient care and quality of life.

Introduction:

Oral mucosal lesions encompass a spectrum of pathological conditions, ranging from benign ulcers to potentially malignant disorders, posing diagnostic and therapeutic challenges in clinical practice (1). Conventional treatments, including topical corticosteroids, antimicrobials, and analgesics, often provide symptomatic relief but may exhibit limited efficacy and adverse effects (2). In recent years, regenerative medicine has emerged as a promising approach for enhancing wound healing and tissue regeneration (3). Autologous platelet concentrates (APCs), derived from the patient's own blood, have gained attention for their potential therapeutic applications in various medical fields, including oral and maxillofacial surgery (4).

APCs, such as platelet-rich plasma (PRP) and platelet-rich fibrin (PRF), contain a concentrated pool of growth factors, cytokines, and bioactive molecules that play crucial roles in tissue repair, angiogenesis, and immune modulation (5). These biological properties make APCs attractive candidates for accelerating wound healing and mitigating inflammation in oral mucosal lesions (6). Several studies have explored the efficacy of APCs in managing conditions such as oral ulcers, oral lichen planus, and oral submucous fibrosis, demonstrating promising results in terms of pain reduction, improved healing outcomes, and reduced recurrence rates (7, 8).

Despite the growing body of evidence supporting the therapeutic potential of APCs in oral lesion management, inconsistencies in study methodologies, treatment protocols, and outcome measures warrant further investigation (9). Standardization of APC preparation techniques, optimization of treatment protocols, and rigorous clinical trials are necessary to establish the safety, efficacy, and long-term benefits of APC therapy in oral mucosal lesions (10). This review aims to critically evaluate the existing literature on the efficacy of APCs in the treatment of oral mucosal lesions, providing insights into their mechanisms of action and potential clinical applications.

Oral mucosal lesions encompass a spectrum of pathological conditions, posing diagnostic and therapeutic challenges in clinical practice (1). Conventional treatments provide symptomatic relief but may exhibit limited efficacy and adverse effects. Autologous platelet concentrates (APCs) have garnered attention for their potential therapeutic applications in oral lesion management (2).

Biological Basis of Autologous Platelet Concentrates APCs, such as platelet-rich plasma (PRP) and platelet-rich fibrin (PRF), contain a concentrated pool of growth factors, cytokines, and bioactive molecules essential for tissue repair, angiogenesis, and immune modulation (3). These properties make APCs attractive candidates for accelerating wound healing and mitigating inflammation in oral mucosal lesions.

Efficacy of APCs in Oral Ulcers Oral ulcers, including recurrent aphthous stomatitis (RAS) and traumatic ulcers, are common mucosal lesions characterized by pain and discomfort. Several studies have investigated the efficacy of APC therapy in promoting ulcer healing and reducing pain in patients with RAS and traumatic ulcers (4). Results demonstrate significant improvements in healing outcomes and pain reduction following APC treatment.

APCs in Oral Lichen Planus Oral lichen planus (OLP) is a chronic inflammatory condition affecting the oral mucosa, presenting with characteristic white reticular or erosive lesions. Conventional treatment options for OLP are often palliative and may not address the underlying

inflammatory process. Emerging evidence suggests that APCs possess anti-inflammatory properties and may aid in the management of OLP by reducing inflammation and promoting tissue regeneration (5).

Role of APCs in Oral Submucous Fibrosis Oral submucous fibrosis (OSMF) is a potentially malignant disorder characterized by progressive fibrosis of the oral mucosa, leading to limited mouth opening and difficulty in eating and speaking. Conventional treatment modalities for OSMF are limited, and there is a need for effective therapeutic interventions. Preliminary studies have shown promising results with APC therapy in improving mouth opening and reducing fibrotic changes in patients with OSMF (6).

Mechanisms of Action of APCs The therapeutic effects of APCs in oral mucosal lesions are mediated through multiple mechanisms, including the release of growth factors, cytokines, and chemokines, which promote angiogenesis, cell proliferation, and tissue regeneration. Additionally, APCs modulate the inflammatory response, leading to reduced inflammation and enhanced wound healing (7).

Clinical Considerations and Future Directions Despite promising outcomes, several clinical considerations need to be addressed for the widespread adoption of APC therapy in oral lesion management. Standardization of APC preparation techniques, optimization of treatment protocols, and rigorous clinical trials are necessary to establish the safety, efficacy, and long-term benefits of APC therapy in oral mucosal lesions.

Clinical Trials and Evidence-Based Practice While several studies have shown promising results with APC therapy in oral mucosal lesions, the evidence base is still evolving. Many of the existing studies are small-scale, single-center trials with heterogeneous patient populations and varying treatment protocols. Large-scale, multicenter randomized controlled trials (RCTs) are needed to provide high-quality evidence regarding the efficacy and safety of APCs in oral lesion management. Additionally, long-term follow-up studies are essential to assess the durability of treatment outcomes and potential recurrence rates.

Safety Considerations and Adverse Effects Autologous platelet concentrates are generally considered safe, as they are derived from the patient's own blood, minimizing the risk of immune reactions or disease transmission. However, like any medical intervention, APC therapy carries the potential for adverse effects. Common adverse events associated with APCs include mild pain or discomfort at the injection site, bruising, and transient swelling. Serious complications such as infection or allergic reactions are rare but should be monitored closely. Clinicians should carefully evaluate the patient's medical history and potential contraindications before recommending APC therapy.

Patient Selection and Treatment Considerations Patient selection is crucial for the success of APC therapy in oral mucosal lesions. Factors such as the underlying etiology of the lesion, its severity, and the patient's overall health status should be taken into account when determining candidacy for APC treatment. Additionally, individualized treatment plans tailored to the patient's specific needs and preferences are essential for optimizing outcomes. Close collaboration between clinicians, oral surgeons, and other healthcare providers is recommended to ensure comprehensive care and effective management of oral mucosal lesions.

Future Directions and Potential Innovations The field of regenerative medicine continues to evolve rapidly, offering new opportunities for enhancing wound healing and tissue

Dr. Manpreet Kaur / Afr.J.Bio.Sc. 6(9) (2024) 146-150

regeneration in oral mucosal lesions. Emerging technologies such as tissue engineering, gene therapy, and stem cell-based approaches hold promise for revolutionizing the treatment landscape. Future research efforts should focus on exploring novel therapeutic targets, optimizing treatment protocols, and translating laboratory findings into clinical practice. Collaborative interdisciplinary research endeavors will be instrumental in driving innovation and improving outcomes for patients with oral mucosal lesions.

Conclusion

Autologous platelet concentrates (APCs) represent a promising therapeutic approach for the management of oral mucosal lesions. Through the release of growth factors, cytokines, and bioactive molecules, APCs facilitate wound healing, reduce inflammation, and promote tissue regeneration. While the existing evidence supports the efficacy of APC therapy in various oral lesions, further research is warranted to establish standardized treatment protocols, optimize patient selection criteria, and assess long-term outcomes.

Despite the potential benefits of APC therapy, several challenges remain, including the need for large-scale randomized controlled trials to provide robust evidence of efficacy and safety. Additionally, efforts should be made to address practical considerations such as standardization of APC preparation techniques, optimization of treatment delivery methods, and cost-effectiveness analysis. Close collaboration between researchers, clinicians, and industry stakeholders is essential to drive innovation and translate research findings into clinical practice.

In conclusion, APC therapy holds promise as a valuable adjunctive treatment modality for oral mucosal lesions, offering clinicians a novel approach to enhance wound healing and improve patient outcomes. As the field of regenerative medicine continues to advance, APCs represent a significant opportunity to revolutionize the management of oral lesions and improve the quality of life for patients worldwide.

References:

- 1. Scully C, Felix DH. Oral medicine—update for the dental practitioner: mucosal ulcerative diseases. Br Dent J. 2005;199(6):361-8.
- 2. Woo SB, Sonis ST. Recurrent aphthous ulcers: a review of diagnosis and treatment. J Am Dent Assoc. 1996;127(8):1202-13.
- 3. Gurtner GC, Werner S, Barrandon Y, Longaker MT. Wound repair and regeneration. Nature. 2008;453(7193):314-21.
- 4. Marx RE. Platelet-rich plasma (PRP): what is PRP and what is not PRP? Implant Dent. 2001;10(4):225-8.
- 5. Dohan Ehrenfest DM, Rasmusson L, Albrektsson T. Classification of platelet concentrates: from pure platelet-rich plasma (P-PRP) to leucocyte- and platelet-rich fibrin (L-PRF). Trends Biotechnol. 2009;27(3):158-67.
- 6. Anitua E, Andia I, Ardanza B, Nurden P, Nurden AT. Autologous platelets as a source of proteins for healing and tissue regeneration. Thromb Haemost. 2004;91(1):4-15.
- 7. Kaur P, Sogi SH, Sharma S, Kaur J, Dabas J. Platelet-rich fibrin: A new paradigm in periodontal regeneration. Cell Tissue Bank. 2015;16(3):285-91.
- 8. Chatterjee A. Platelet-rich fibrin: the benefits. Dent Res J (Isfahan). 2016;13(4):371-8.

- 9. Del Fabbro M, Bortolin M, Taschieri S, Weinstein RL. Is platelet concentrate advantageous for the surgical treatment of periodontal diseases? A systematic review and meta-analysis. J Periodontol. 2011;82(8):1100-11.
- 10. Graziani F, Ivanovski S, Cei S, Ducci F, Tonetti M, Gabriele M. The in vitro effect of different PRP concentrations on osteoblasts and fibroblasts. Clin Oral Implants Res. 2006;17(2):212-9.
- 11. Marinucci L, Balloni S, Fettucciari K, Bodo M, Talesa VN, Antognelli C, et al. In vitro effects of different PRP concentrations on proliferation and differentiation of HUVECs. J Biol Regul Homeost Agents. 2016;30(4):1049-58.