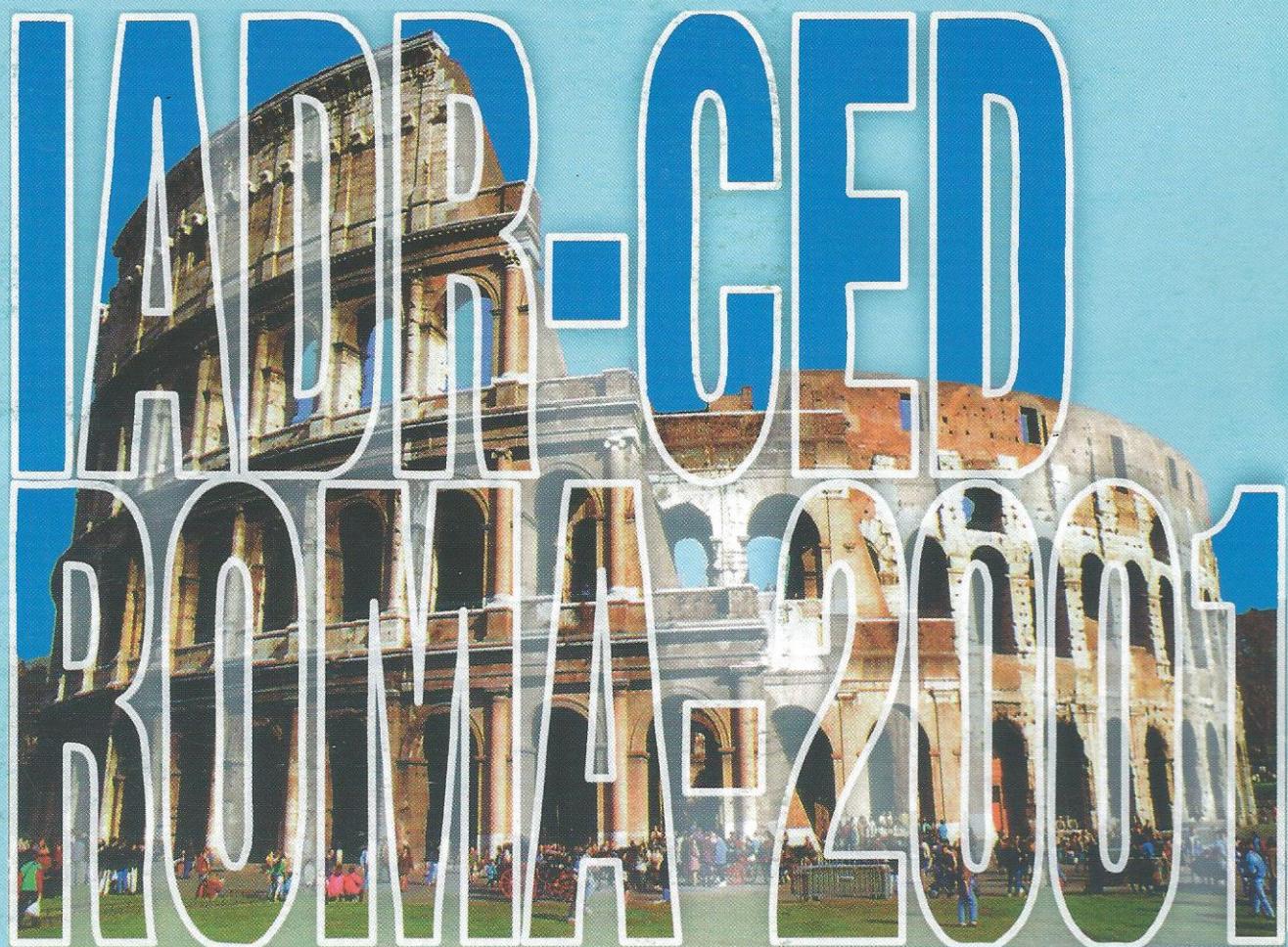


**37TH Annual Meeting of the Continental
European Division of the International
Association for Dental Research**

5-8 SEPTEMBER 2001, ROME, ITALY



PROGRAMME

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6.00 P.M.

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Deadline for submission: April 15th, 2001**ELECTROLYTE AND PROTEIN SECRETION IN CYSTIC FIBROSIS SALIVA**F. Vernet^{1*}, J. Carrere², P. Tramini¹, C. Figarella² and M.D. Merten²

(1, Dental University of Montpellier, France. 2, G.R.G.E., Faculté de Médecine, Marseille, France.)

CF is characterized by a general defect in exocrine secretion and studies of salivary secretion can be used as a non-invasive model of examination of relatively large volumes of affected exocrine glands. Since the secretory leucocyte proteinase inhibitor (SLPI) is a specific protein marker of serous secretion implicated in salivary antibacterial, antiviral and antifungal defense, we measured its concentration as well as the electrolyte and protein contents of total saliva from normal and CF individuals under resting conditions and during masticatory stimulation.

Methods: total saliva from 22 control (4-15 years old) and 13 CF (3-17 years old) were collected under resting conditions for 5 min and after chewing a piece of PARAFILM® (used for saliva stimulation) for 2 min. SLPI was assayed by ELISA and electrolytes, total proteins, and amylase were measured with classical techniques.

Results: SLPI concentration was showed to be significantly decreased in CF saliva after stimulation compared to control subjects whereas no difference in amylase stimulated secretion was observed between normal and CF. As already reported in the literature, our data showed that chloride concentration was higher in CF saliva than in control under resting conditions. Nevertheless chloride concentration does not show any differences in stimulated conditions between control and CF saliva. Our results of sodium and calcium concentration are also similar to those reported elsewhere.

Statistical analysis: Differences between stimulated and resting values were assessed by Student's *t*-test.

Conclusion: Our results suggest a specific regulatory defect of SLPI secretion in CF salivary glands *in vivo*, likely to be directly related to the genetic defect. This observation rises the questions of mechanism of this specific secretory defect, the possible implication in oropharyngal microbial contamination and gives the possibility of using saliva as a model to investigate the effect of new drug therapies.

Supported by "Vaincre la Mucoviscidose".

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