

Effect of *Randia acuminata*, *Garcinia manii* and *Symphonia globulifera* on Oral Flora

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Abstract: Microbial analysis of oral flora of individual from ten to sixty years was carried out alongside with sensitivity test, using routine microbiological methods. Plant extraction and phytochemical analysis was also carried out using standard chemical technique. Total Bacterial Count (TBC) obtained from male subject before mouth brushing with *R.acuminata*, ranged from 4.4×10^4 cfu/ml to 8.1×10^4 cfu/ml and 2.1×10^3 cfu/ml to 3.6×10^3 cfu/ml after brushing. TBC obtained from female subject before brushing ranged from 4.4×10^4 cfu/ml to 8.1×10^4 cfu/ml and 1.7×10^3 cfu/ml to 3.6×10^3 cfu/ml after brushing. TBC obtained from male subject before brushing with *Garcinia manii* ranged from 3.9×10^4 cfu/ml to 6.9×10^4 cfu/ml and 2.0×10^3 cfu/ml to 3.3×10^3 cfu/ml after brushing. TBC obtained from female subjects ranges from 6.1×10^4 cfu/ml to 8.1×10^4 cfu/ml and 4.2×10^3 cfu/ml to 6.1×10^3 cfu/ml after brushing. TBC obtained from male subject before brushing with *Symphonia globulifera* ranged from 4.1×10^4 cfu/ml to 7.1×10^4 cfu/ml and 1.2×10^3 cfu/ml to 4.1×10^3 cfu/ml after brushing. TBC obtained from female subjects range from 6.2×10^4 cfu/ml to 8.4×10^4 cfu/ml and 1.2×10^3 to 4.1×10^3 after brushing. The predominant isolates were *Lactobacillus* sp 25.6%, *Staphylococcus* sp 16.8% *Enterobacter* sp and *Campylobacter* sp 10.2% and 10.1% respectively, *Streptococcus* mutant 8.0%, *Corynebacteria* sp 7.1%, *Veillonella* sp and *Streptococcus oralis* 4.7% and 4.2% respectively. The least were *Streptococcus virans* 3.9%, *Fusobacterium* sp 3.8%, *Klebsiella* sp 3.6% and *Atinobacillus* sp 1.9%. The sensitivity test revealed the potency of the plants, among the organism tested, the highest average zone of inhibition at 300mg/ml was obtained from *Randia acuminata* 19.7mm followed by *Garcinia manii* 10.4mm while *Symphonia globulifera* had the list 7.8 mm. The potency observed by these plants extract may be as a result of alkaloid, flavonoids, phlobatannins, tannins, anthroquinones, terpenes and cardiac slycosides present in the plants.

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I. Introduction

Organs and structures in the oral cavity are infected by bacteria. Mouth serves as portal of entry into the body, the mucous membrane of the mouth and pharynx are often sterile at birth but may be contaminated by passage of the birth canal (Jaluetz *et al.*, 2004). Report by Menichetti 2005, revealed that mouth harbour a wide range of microorganism both aerobic and anaerobic including *staphylococci*, gram negative *diplococci*, *Brahmella cartarrhalis*, *Diphtheriods* and *Lactobacilli* are added when teeth begins to emerge. The anaerobic spirochetes, provotella species especially (*P. milaninogenica*), *Fusobacterium* species, *Rothia* species and *Capnocytophage* spp establish themselves together with some anaerobic vibrios. *Actinomyces* spp are usually found in Tonsillar tissue and on adult gingival. Various protozoa may be present (Menichetti 2005). *Streptococci mutant* are one of the major colonizer of the teeth surface (Chambers 2001). Types of microorganism found in the mouth varies and it is best on the sites. People that eat sucrose diet, the bacteria that break down the sugar produces substance that help them stick to the tooth surface. In this process lactic acid bacteria produced lowers the pH in the mouth enhancing the growth of *Lactobacillus* (Chambers 2001). Report revealed that about 1000,000,000 bacteria contains in one milliliter of saliva and other digestive enzymes, including a number of other substance especially antimicrobial compound. These include secretory IgA, lysozyme and lactoterrin, saliva thus help to prevent colonization with potentially pathogenic bacteria (Fauci 2005).

Oral cleansing is an age long practice among human beings, the use of medicinal sticks for oral cleansing is an ongoing practice in some rural part of the world particularly in Nigeria. The medicinal plant used for oral cleansing varies from place to place depending on their medicinal value and understanding.

Randia acuminata is a commonly used chewing stick for mouth cleansing. It is a small tree of about 5m or a shrub size flowering plant with yellow white fruit with long stem (Iwu 2014). It is a tropical plant with medicinal values. The stem is used as chewing stick in southern Nigeria, pulped root are used for treatment of dysentery through anal route (as anema), incised juice from fruit are used for eye treatment as eye drop in

Sierra Leone. The Iwu 2014 reported that *R. acuminata* has significant antimicrobial effect against oral pathogens including bacterial species. *R. acuminata* are significantly and more frequently used as medicinal plant for oral hygiene (Ajibesin *et al.*, 2008) *Garcinia Manii* has stem (Logs), a perennial tall evergreen forest tree of about 3m-9m from family Garciniaceae usually found in Cross River, Akwa Ibom and southern Cameroon forest ecosystem (Nucitoh *et al* 2010) *G. manii* has medicinal value and has been used for treatment of mouth odors and in production of tooth brushes for traditional uses by South Eastern Nigeria, West and central African countries (Nwatoh 2010 and 2011) *Symphonia globulifera* is a timber tree occurring naturally in rainforest of tropical Africa and America along river. It is both use as ornamental plant and as medicinal plant. It is used for treatment of gonorrhoea and as a diuretic in some part of Nigeria, boiled bark and root are used for the treatment of itching. The bark is also used for treatment of cough in children (Nkengfack *et al.*, 2002; Ajibesin *et al.*, 2008).

The extract of *Symphonia globulifera* exhibited antimicrobial activity against *Staphylococcus aureus*, *Bacillus subtilis*, and *E. coli* (Nkengfack *et al.*, 2002). Bioflavonoid and xanthories extracted from the stem of *symphonia globulifera* revealed effective antimicrobial activity (Mkouna *et al.*, 2009).

II. Methodology

Ethical condition upon the entrance of a compound, the family head was approach and informed of the study. Following the informed consent members of the family were sampled with questionnaires which were filled. Persons who refused consent were excluded from the study.

Sample collection: Each registered subject served with structured questionnaire and oral gargle with sterile water was collected from each subject before and after brushing the mouth in the morning.

Isolation: Serial dilution was carried out with the sample using bactopectone, the samples were serially diluted up to 1:1000 for samples before brushing and 1:100 for sample after brushing. I milliliter from each was introduced to sterile Petri dish in triplicate as inoculum, 20ml each of media was added hence pour plate technique was applied. The nutrient agar plates were for total viable counts while the MacConkey plates were for total coliform counts, (Cheesbrough 2003). The plates were incubated in the incubator at 37^oc for 24 to 48 hours. The emerging colonies were subcultured cheesbrough (2003). Colonies were stocked for characterization and further analysis.

Characterization: Pure isolates were achieved by continuous sub-culturing, 18 hours old was subjected to the following test. Gram staining for gram's reaction and morphology, motility test to detect motile organisms, catalase test for catalase producing organisms, oxidase tests for oxidase positive, urease activity, citrate utilization, indole test, MR VP test, coagulase test and carbohydrate fermentation test for acid and gas production.

Extraction: The stems of each plant were cut into piece and dried at 39^oC to dryness. The dried piece were ground to powder, 200g each were macerated in a flask with one liter of 70% ethanol for seventy two hours (72 hours). The crude extracts were filtered and the marc were discarded, the filtrates were concentrated to dryness at 40^oC using digital regulated water bath Trease and Evans (2002).

Phytochemical Screening: Basic Phytochemical Screening consists of performing simple chemical test according to Soforowa 2006 to specifically elucidate the presence of alkaloids, tannins, saponins, flavonoids, antroquinones, phlobatanins and glycosides in the plants extract.

Preparation of Concentrations of the Extracts

Stock solution was prepared from each concentrated extracts by dissolving 1g of extract in 1mg of sterile distilled water. This gave a concentration of 1000mg/ml, other concentrations were prepared by using simple dilution ratio $C_1V_1 = C_2V_2$ to obtain 100mg/ml, 200mg/ml and 300mg/ml.

Sensitivity Test: Sterile plates of Muller Hinton agar 25ml each were prepared and allowed to set. A sterile cork borer 4mm diameter was used to burrow holes on each plate. Sterile micropipette was used to drop 5 microliter of the molten Muller Hinton agar as base for the holes. With the aid of sterile swap sticks, the test organisms were spread on the surface of the media. 0.1ml of each of the concentration 100mg/ml, 200mg/ml and 300mg/ml were introduced into the holes and incubated for 18 hours. The zone of inhibitions were read using vernier caliper. The NCCLS standard was used for interpretation of the reading.

III. Results/Discussion

It has long been noticed that mouth harbours a wide range of bacteria both gram-positive and gram-negative bacteria. A total of six hundred humans were sampled in Uyo municipality before and after brushing, two hundred each with *R. acuminata*, *S. globulifera* and *G. manii*.

The total bacterial count obtained from male/female subjects before brushing with *Randia acuminata* ranged from 4.4×10^4 cfu/ml to 9.5×10^4 cfu/ml after brushing ranged from 1.7×10^3 cfu/ml to 5.6×10^3 cfu/ml. Total bacterial count obtained from male/female subject before brushing with *symphonia globulifera* ranged from 3.9×10^4 cfu/ml to 9.0×10^4 cfu/ml after brushing ranged from 2.0×10^3 cfu/ml to 6.1×10^3 cfu/ml while total count bacterial obtained from male/female subjects before brushing with *Garcinia manii* ranged from 3.8×10^4 cfu/ml to 8.4×10^4 cfu/ml after brushing 2.2×10^3 cfu/ml to 6.9×10^3 cfu/ml. There was no significant different at $p < 0.05$ between male and female subject may be because of mode of sharing things or eating same nature of food within the municipality. The bacterial load agrees with Menichett 2005 that mouth harbor a wide range of microorganism.

In this study, a total of three hundred male subject and a total of three hundred female subject aged 10-60 residents in Uyo municipality participated, questionnaire analyses reveals common mouth and dental disorders among the studied subjects which were mouth odour, tooth decay, bleeding gum, toothache and uprooted tooth which may be due to dietary intakes or lack of proper oral hygiene. This conforms to the study conducted by Touger-Decker and Van (2003).

Much sugary food consumed by certain class of individual aid bacteria to produce acid which demineralize enamel dentin and cementum, thus may lead to the decay of gums, mouth odour and tooth removal. Left over particle in the mouth if not properly brush may also give the same effect. Some odour is as a result of decayed food particle deposited in root canal.

The investigation reveals the present of *streptococcus mutant* 8.0%, *lactobacillus* 25.6%, *Atinobacillus* 1.9%. This in line with Rogers (2008), most of the disorders and dental caries observed from individuals tooth may be as a result of harbouring these organisms. *Staphylococcus* sp, *enterobacter* sp, *campylobacter* sp, *streptococcus virian*, *fusabacterium* sp, *veillonella* sp, *corynebacterium* sp, *streptococcus oralis* and *klebsiella* sp were isolated. Unhygienic condition and regular consumption of certain class of food support growth of these organisms. The attachment of these organisms to the tooth causes caries and also causes other mouth defect and diseases. From total bacterial count obtained in tables 1-6 reduction in bacterial load of the mouth was observed after brushing with each of the medicinal plant used. *Randia acuminata* gave the highest reduction followed by *Garcinia manii* and *symphonia globulifera* is the least. Local use of these medicinal plants is of great important.

The occurrence of isolates decrease with age; in table 9 more isolate were obtained from age 10-40, followed by 41-50. These age bracket is a picture of juvenile and active people who depend much on eateries and sweet pleasant foods. Table 7 shows their percentage.

Photochemical screening of the plants revealed the present of alkaloids, saponins, phlobatannins, anthroquinones, flavonoids, tannins, cardiac glycosides. These qualify the plants as medicinal plants and some of the metabolites obtained are of antimicrobial qualities. The sensitivity test of the plants with mouth isolate table II, revealed the broad spectrum effect of each of the plant. The efficacy of each of these plants on mouth isolates increases with the increase of the concentration. The most potent plant among them is *Randia acuminata*. Others also showed varied effect as reveal by their zone of inhibition.

IV. Conclusion

Having observed the present of these organisms from mouth of occupant of Uyo municipality, it is obvious that proper mouth cleaning should be emphasized. These medicinal plants especially *Randia acuminata*, which is commonly available in the area should be used for mouth cleaning because they have broad spectrum effect on the organism and will be very useful for mouth diseases and other mouth defect. Proper health education should be done concerning consumption of some food (e.g. much sugary foods both raw and prepared). Healthy mouth equals health life, Health officers should educate the public on these exposed danger so as to curb feature problem of mouth outbreak diseases. Especially those living within the municipality.

Table 1: Total bacterial count obtained from female subject before and after mouth brushing with *Randia acuminata*

Ages (years)	Number involved n = 100	Average total bacterial count (cfu/ml)	
		Before brushing	After brushing
10 - 20	34	7.8×10^4	2.2×10^3
21 - 30	26	9.5×10^4	5.6×10^3
31 - 40	16	9.1×10^4	3.7×10^3
41 - 50	15	8.7×10^4	4.4×10^3
51 - 60	9	8.9×10^4	3.6×10^3

Table 2: Total bacterial count obtained from Male subject before and after mouth brushing with *Randia acuminata*

Ages (years)	Number involved n = 100	Average total bacterial count (cfu/ml)	
		Before brushing	After brushing
10 - 20	36	6.7 X 10 ⁴	2.7 X 10 ³
21 - 30	24	8.1 X 10 ⁴	3.1 X 10 ³
31 - 40	22	7.3 X 10 ⁴	3.6 X 10 ³
41 - 50	14	4.4 X 10 ⁴	2.1 X 10 ³
51 - 60	14	6.9 X 10 ⁴	1.7 X 10 ³

Table 3: Total bacterial count obtained from female subject before and after mouth brushing with *Gacinia manii*

Ages (years)	Number involved n = 100	Average total bacterial count (cfu/ml)	
		Before mouth brushing	After mouth Brushing
10 - 20	30	6.1 X 10 ⁴	4.2 X 10 ³
21 - 30	21	9.0 X 10 ⁴	6.1 X 10 ³
31 - 40	30	8.1 X 10 ⁴	5.8 X 10 ³
41 - 50	9	7.4 X 10 ⁴	5.0 X 10 ³
51 - 60	10	7.9 X 10 ⁴	4.9 X 10 ³

Table 4: Total bacterial count obtained from Male subject before and after mouth brushing with *Gacinia manii*

Ages (years)	Number involved n = 100	Average total bacterial count (cfu/ml)	
		Before mouth brushing	After mouth brushing
10 - 20	22	5.7 X 10 ⁴	2.7 X 10 ³
21 - 30	34	5.8 X 10 ⁴	2.2 X 10 ³
31 - 40	23	6.9 X 10 ⁴	3.3 X 10 ³
41 - 50	14	5.1 X 10 ⁴	2.9 X 10 ³
51 - 60	7	3.9 X 10 ⁴	2.0 X 10 ³

Table 5: The bacterial count obtained from Female subject before and after mouth brushing with *Symphonia globulifera*

Ages (years)	Female Subject n = 100	Before mouth brushing	After mouth brushing
10 - 20	27	6.8 X 10 ⁴	3.2 X 10 ³
21 - 30	30	7.3 X 10 ⁴	3.6 X 10 ³
31 - 40	22	8.4 X 10 ⁴	6.9 X 10 ³
41 - 50	4	7.3 X 10 ⁴	4.7 X 10 ³
51 - 60	7	6.2 X 10 ⁴	3.1 X 10 ³

Table 6: Total bacterial count obtained from male subject before and after mouth brushing with *Symphonia globulifera*

Ages (years)	Male Subject n = 100	Before mouth brushing	After mouth brushing
10 - 20	35	5.2 X 10 ⁴	3.7 X 10 ³
21 - 30	26	7.1 X 10 ⁴	3.1 X 10 ³
31 - 40	18	6.0 X 10 ⁴	4.1 X 10 ³
41 - 50	13	4.1 X 10 ⁴	2.4 X 10 ³
51 - 60	8	3.8 X 10 ⁴	1.2 X 10 ³

Table 7: Total Male and Female Subject Involved in the Study

Ages	<i>Garcinia manni</i>		<i>Randia acuminata</i>		<i>Symphonia globulifera</i>		Total	Percentage
	Male n = 100	Female n = 100	Male n = 100	Female n = 100	Male n = 100	Female n = 100		
10-20	35	27	36	34	22	30	184	30.7
21-30	26	30	24	26	34	21	161	26.8
31-40	18	22	23	16	24	30	133	22.2
41-50	13	14	13	15	12	9	76	12.7
51-60	8	7	4	9	8	10	46	7.6
Total							600	100

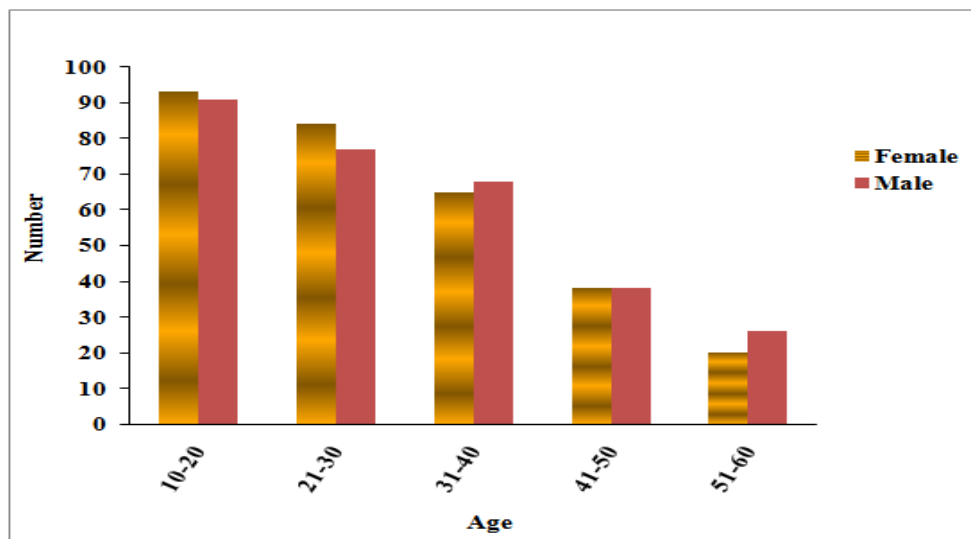


Fig. 1: Male and Female Subjects

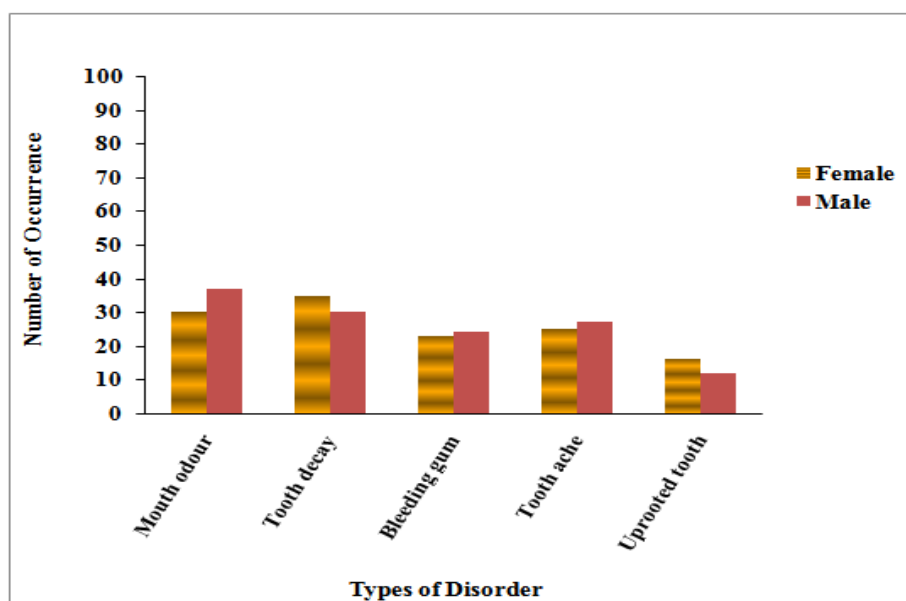


Fig. 2: Common mouth disorder associated with studied subject

Table 8: Phytochemical screening of stem bark of *R. acuminata*, *G. manii* and *S. globulifera*

Metabolites	<i>Randia acuminata</i>	<i>Garcinia Manii</i>	<i>Symphonia globulifera</i>
Saponins	+++	-	+++
Alkaloids	++	+++	++
Flavonoids	+++	+++	+++
Tannins	++	++	-
Phlobataninins	-	-	-
Anthroquinones	-	-	+++
Carliac glycoside	++	++	-
Lieberman's test	-	-	-
Keller – killiani's test	++	+	++

+++ = High concentration , ++ = Moderate concentration
 + = Low concentration , -- = Absent

Table 9: Organisms isolated from mouth with different groups from mouth with different age group

Ages	Organism	Number Occurrence
10-20	* <i>Staphylococcus</i> sp	40
	<i>Enterobacter</i> sp	44
	<i>Campylobacter</i> sp	15
	<i>Streptococcus mutant</i>	17
	<i>Corynebacterium</i> sp	21
	<i>Veillonella</i> sp	10
	<i>Lactobacillus</i> sp	61
	<i>Streptococcus virans</i>	4
21-30	* <i>Streptococcus virans</i>	6
	<i>Lactobacillus</i> sp	67
	<i>Fusabacterium</i> sp	8
	<i>Veillonella</i> sp	4
	<i>Streptococcus oralis</i>	9
	<i>Atinobacillus</i> sp	6
	<i>Campylobacter</i> sp	17
	<i>Enterobacter</i> sp	21
	<i>Staphylococcus</i> sp	36
31-40	* <i>Lactobacillus</i> sp	30
	<i>Streptococcus oralis</i>	10
	<i>Fusabacterium</i> sp	12
	<i>Klebsiella</i> sp	10
	<i>Campylobacter</i> sp	31
	<i>Staphylococcus</i> sp	18
	<i>Enterobacter</i> sp	15
<i>Corynebacterium</i> sp	17	
41-50	* <i>Streptococcus virans</i>	15
	<i>Klebsiella</i> sp	13
	<i>Lactobacillus</i> sp	3
	<i>Streptococcus mutant</i>	18
	<i>Staphylococcus</i> sp	6
	<i>Enterobacter</i> sp	5
	<i>Streptococcus mutant</i>	7
	<i>Corynebacterium</i>	9
<i>Veillonella</i> sp	6	
51-60	* <i>Lactobacillus</i> sp	2
	<i>Fusabacterium</i>	4
	<i>Veillonella</i> sp	10
	<i>Staphylococcus</i> sp	6
	<i>Streptococcus mutant</i>	16
	<i>Campylobacter</i> sp	1
	<i>Corynebacterium</i> sp	4
<i>Streptococcus oralis</i>	8	

Table 10 Bacteria isolated from mouth and their percentage of occurrence

Organism	Number of occurrence	Percentage of occurrence
<i>Staphylococcus</i> sp	107	16.8
<i>Enterobacter</i> sp	65	10.2
<i>Campylobacter</i> sp	64	10.1
<i>Streptococcus mutant</i>	51	8.0
<i>Lactobacillus</i> sp	103	25.6
<i>Streptococcus virans</i>	25	3.9
<i>Fusabacterium</i> sp	24	3.8
<i>Veillonella</i> sp	30	4.7
<i>Corynebacteria</i> sp	45	7.1
<i>Streptococcus oralis</i>	27	4.2
<i>Atinobacillus</i> sp	12	1.9
<i>Klebsiella</i> sp	23	3.6

Please remove this table and replace table11 below here. Table 11 is the correct table that reflect in the abstract and in discussion

Table 11: The Potency of *R. acuminata*, *G. manii* and *S. globulifera* on mouth isolates and their Zones of Inhibition

Isolate Organism	No Tested	Randia acuminata					Ciarcinia manil					Symphonia globulifera				
		Concentration used					Concentration used					Concentration used				
		100	Zn	200	Zn	300	100	Zn	200	Zn	300	100	Zn	200	Zn	300
<i>Staphylococcus</i> sp	20	18		25		30	12		18		25	0		0		10
<i>Campylobacter</i> sp	20	15		18		20	0		0		15	0		15		18
<i>Corynebacterium</i> sp	20	0		0		15	0		0		0	15		18		18
<i>Veillonella</i> sp	20	0		18		25	0		0		15	0		0		0
<i>Atinobacillus</i> sp	10	0		0		15	0		0		0	0		0		0
<i>Enterobacter</i> sp	20	0		0		15	0		0		10	0		0		0
<i>Fusobacterium</i> sp	20	0		0		0	0		0		0	0		0		0
<i>Strept. mutant</i>	20	0		0		20	0		10		15	0		0		0
<i>Streptococcus oralis</i>	10	0		0		20	0		0		15	0		0		10
<i>Streptococcus virans</i>	10	0		0		18	0		0		10	0		0		0
<i>Klebsiella</i> sp	20	14		24		30	0		0		0	0		15		22
<i>Lactobacillus</i> sp	20	15		22		28	15		16		20	10		15		15

Average zone of inhibition
 2.1mm 5.2mm 8.9mm 19.7mm 2.3mm 3.7mm 10.4mm
 5.3mm 7.8mm

Legend: Zn= zone of inhibition

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