



LIBRARIES

UNIVERSITY OF WISCONSIN - MADISON

Proxigel advertisement.

[s.l.]: [s.n.], 1977

<https://digital.library.wisc.edu/1711.dl/6DXANMSMXLJPU8Z>

<http://rightsstatements.org/vocab/InC/1.0/>

The libraries provide public access to a wide range of material, including online exhibits, digitized collections, archival finding aids, our catalog, online articles, and a growing range of materials in many media.

When possible, we provide rights information in catalog records, finding aids, and other metadata that accompanies collections or items. However, it is always the user's obligation to evaluate copyright and rights issues in light of their own use.

THE R.A.U. PATIENT.

CAN THE PROBLEMS IN HIS MOUTH BE LINKED TO THE PROBLEMS ON HIS MIND?

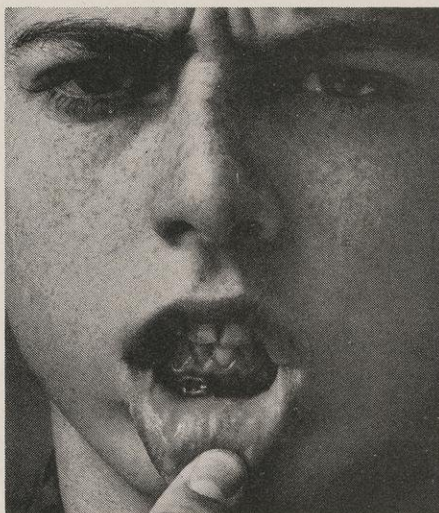
Twenty years of research are now shedding an entirely different light on the canker sore, or as physicians now call it—recurrent aphthous ulceration (R.A.U.). Because the apparently arbitrary exacerbations and remissions that characterize R.A.U. may actually be linked to the presence of emotional stress.¹⁻⁵

R.A.U.—how to recognize it

The aphthous ulcer appears out of nowhere and usually disappears without incident. So most patients dismiss it as little more than a bothersome fact of life. But R.A.U. is actually a complex medical syndrome. It is characterized by single or multiple lesions of 2-20 mm in diameter that appear repeatedly on any of the moist mucous membranes of the mouth. A positive history of recurrences, the healthy appearance of surrounding tissue and the absence of associated systemic disorders will distinguish it from any other oral disease, including a herpetic infection.⁴

Extremely high incidence seen in students under stress

Ship et al⁵ uncovered the most extensive evidence of the relationship between R.A.U. and stress in a major study of medical, dental, nursing and veterinary students in the University of Pennsylvania area. Of over 1700 students, 55% suffered from R.A.U. Furthermore, the medical histories of 64% of the students revealed that the group with R.A.U. reported significantly more emotional problems than those without the disease—problems that were in fact related to the frequency of each attack.



Correlation between R.A.U. and other ulcerative syndromes

Naturally a highly-selected population survey should be interpreted with caution. But additional findings by Ship in a subsequent investigation⁴ suggest that the connection between R.A.U. and the mind under stress is more than coincidental: for the typical R.A.U. patient, the problem of ulcers doesn't stop in the oral cavity. Gastrointestinal and/or vulvovaginal ulcers plus a variety of other disorders, especially allergies, are often present as well.

Treatment remains palliative

No one knows the precise etiology of R.A.U. Its high incidence in environments notorious for intense pressure and mental strain, and its correlation with disorders long known to be at least partly psychogenic, strongly implicate stress as a leading factor. But until we can positively discern and treat the primary cause of R.A.U., treatment is still centered on debriding the lesion and relieving the pain.

Proxigel: to cleanse and help soothe minor oral inflammations

Proxigel is the ideal antiseptic to recommend for the R.A.U. patient in your practice and is also useful as adjunctive therapy in gingivitis, periodontitis, stomatitis, Vincent's infection and denture irritation.

Its unique viscous base adheres to affected areas—for longer debriding action on necrotic or pathological tissue.

Proxigel also helps to inhibit odor-causing bacteria. It is bactericidal against pathogens and other microorganisms which may be found in the oral cavity.

And Proxigel helps soothe painful tissue and thus aids in healing.

References: 1. Francis, T.: Recurrent aphthous stomatitis and Behcet's disease, *Oral Surg.* 30:476, October 1970. 2. Greenfield, D.S. and Fasciano, R.W.: Oral ulcerative disease in young adults: diagnosis and management, *J. Am. Coll. Health Assoc.* 23:167, December 1974. 3. McCarthy, P. and Shklar, G.: *Diseases of the Oral Mucosa*, McGraw-Hill Book Company, New York, 1964, p. 192-200. 4. Ship, I.I.: Epidemiologic aspects of recurrent aphthous ulcerations, *Oral Surg.* 33:400, March 1972. 5. Ship, I.I., Morris, A.L., Durocher, R.T. et al: Recurrent aphthous ulcerations and recurrent herpes labialis in a professional school student population, *Oral Surg.* 13:1191, 1317, 1438, Oct. 1960, Nov. 1960, Dec. 1960.

Proxigel Active Ingredient: Carbamide peroxide 11% in a water-free gel base.



Reed & Carnrick
Kenilworth, New Jersey 07033

PROXIGEL®

Oral Antiseptic & Cleanser

Adjunctive therapy for R.A.U.