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Supplementary Materials

Two-Way Relationship Between Helicobacter Pylori Infection and Periodontitis: Results from A Systematic Review and Meta-Analysis

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ABSTRACT

Aim: Helicobacter pylori (H. pylori) infection and periodontitis have considerable worldwide prevalence once they both present systemic alterations with a possible association between them. Therefore, we have performed this meta-analysis to assess the possible association between H. pylori infection and periodontitis. Material and Methods: A systematic search in the literature was performed for studies published before December 2, 2019 in diverse scientific and educational databases. The data was extracted by two investigators and the statistical analysis was performed by Review Manager statistical program with heterogeneity and Odds Ratio (OR) with 95% of Confidence Intervals (CI) calculations as well as a sensitive analysis to assess the accuracy of the results. The value of P<0.05 was considered as significant. In addition, we performed the analysis of the quality of included studies as well as the evaluation for risk of bias.

Results: In overall analysis, *H. pylori* infection was associated with the risk of periodontitis development (OR = 1.72, CI: 1.47, 2.02, P<0.00001) and the periodontitis was considered as a risk factor for *H. pylori* infection (OR = 3.21, CI: 2.31, 4.47, P<0.00001). Moreover, the evaluation of dental plaque from patients with periodontitis reveled increased risk of *H. pylori* infection (OR = 3.46, CI: 2.39, 5.01, P<0.00001).

Conclusions: This current systematic review and meta-analysis composed by 12 studies in 7,059 participants showed that *H. pylori* infection increased significantly the risk of the development of periodontitis and the periodontitis may be a risk for this bacterial infection.

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| Table C1. DDICMA | -11-1: -4 C- | 41- ! | | | |
|------------------|----------------|-----------------|------------|------------|---------------|
| Table S1: PRISMA | . cnecklist to | or this current | systematic | review and | meta-anaiysis |
| | | | | | |

| TITLE | 1 | Identify the general or a systematic gardens and paris or both | #1 |
|----------------------------|----|---|-----------|
| Title | 1 | Identify the report as a systematic review, meta-analysis, or both. | #1 |
| ABSTRACT | 2 | Decide a section of a communicated by a completely bedraying determined by | #2 |
| Structured summary | 2 | Provide a structured summary including, as applicable: background; objectives; data sources; study | #2 |
| | | eligibility criteria, participants, and interventions; study appraisal and synthesis methods; results; | |
| INTER OR LOTTON | | limitations; conclusions and implications of key findings; systematic review registration number. | |
| INTRODUCTION | | | |
| Rationale | 3 | Describe the rationale for the review in the context of what is already known. | #3 – #4 |
| Objectives | 4 | Provide an explicit statement of questions being addressed with reference to participants, interventions, | #4 – #5 |
| | | comparisons, outcomes, and study design (PICOS). | |
| METHODS | | | |
| Protocol and registration | 5 | Indicate if a review protocol exists, if and where it can be accessed (e.g., Web address), and, if available, | #5 |
| | | provide registration information including registration number. | |
| Eligibility criteria | 6 | Specify study characteristics (e.g., PICOS, length of follow-up) and report characteristics (e.g., years | #5 |
| | | considered, language, publication status) used as criteria for eligibility, giving rationale. | |
| Information sources | 7 | Describe all information sources (e.g., databases with dates of coverage, contact with study authors to | #5 |
| | | identify additional studies) in the search and date last searched. | |
| Search | 8 | Present full electronic search strategy for at least one database, including any limits used, such that it | #5 - #6 |
| | | could be repeated. | |
| Study selection | 9 | State the process for selecting studies (i.e., screening, eligibility, included in systematic review, and, if | #6 |
| | | applicable, included in the meta-analysis). | |
| Data collection process | 10 | Describe method of data extraction from reports (e.g., piloted forms, independently, in duplicate) and any | #6 |
| • | | processes for obtaining and confirming data from investigators. | |
| Data items | 11 | List and define all variables for which data were sought (e.g., PICOS, funding sources) and any | _ |
| | | assumptions and simplifications made. | |
| Risk of bias in individual | 12 | Describe methods used for assessing risk of bias of individual studies (including specification of whether | #6 |
| studies | | this was done at the study or outcome level), and how this information is to be used in any data synthesis. | |
| Summary measures | 13 | State the principal summary measures (e.g., risk ratio, difference in means). | #6 |
| Synthesis of results | 14 | Describe the methods of handling data and combining results of studies, if done, including measures of | #6 |
| Synthesis of results | 17 | consistency (e.g., I^2) for each meta-analysis. | #0 |
| | | consistency (e.g., 1) for each meta-analysis. | |
| Risk of bias across | 15 | Specify any assessment of risk of bias that may affect the cumulative evidence (e.g., publication bias, | #6 |
| studies | 13 | selective reporting within studies). | πО |
| Additional analyses | 16 | Describe methods of additional analyses (e.g., sensitivity or subgroup analyses, meta-regression), if | #6 |
| Additional analyses | 10 | done, indicating which were pre-specified. | #0 |
| RESULTS | | doile, indicating which were pre-specified. | |
| | 17 | | F' 1 |
| Study selection | 17 | Give numbers of studies screened, assessed for eligibility, and included in the review, with reasons for | Figure 1 |
| <u> </u> | 10 | exclusions at each stage, ideally with a flow diagram. | |
| Study characteristics | 18 | For each study, present characteristics for which data were extracted (e.g., study size, PICOS, follow- | #6 – #7 - |
| | | up period) and provide the citations. | Table 1 |
| Risk of bias within | 19 | Present data on risk of bias of each study and, if available, any outcome level assessment (see item 12). | #7 |
| studies | | | |
| Results of individual | 20 | For all outcomes considered (benefits or harms), present, for each study: (a) simple summary data for | #7 – #8 |
| studies | | each intervention group (b) effect estimates and confidence intervals, ideally with a forest plot. | |
| Synthesis of results | 21 | Present the main results of the review. If meta-analyses are done, include for each, confidence intervals | #8 - |
| | | and measures of consistency. | Figure 2 |
| Risk of bias across | 22 | Present results of any assessment of risk of bias across studies (see Item 15). | #8 - |
| studies | | | Figure 3 |
| Additional analysis | 23 | Give results of additional analyses, if done (e.g., sensitivity or subgroup analyses, meta-regression [see | #8 |
| | | Item 16]). | |
| DISCUSSION | | | |
| Summary of evidence | 24 | Summarize the main findings including the strength of evidence for each main outcome; consider their | #8 – #9 |
| - | | relevance to key groups (e.g., healthcare providers, users, and policy makers). | |

| Limitations | 25 | Discuss limitations at study and outcome level (e.g., risk of bias), and at review-level (e.g., incomple retrieval of identified research, reporting bias). | |
|-------------|----|---|-----|
| Conclusions | 26 | Provide a general interpretation of the results in the context of other evidence, and implications for future research. | #10 |
| FUNDING | | | |
| Funding | 27 | Describe sources of funding for the systematic review and other support (e.g., supply of data); role of funders for the systematic review. | - |