



IJRASET

International Journal For Research in
Applied Science and Engineering Technology



INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Volume: 13 **Issue:** IV **Month of publication:** April 2025

DOI: <https://doi.org/10.22214/ijraset.2025.69087>

www.ijraset.com

Call:  08813907089

E-mail ID: ijraset@gmail.com

Review on Herbal Mouth Wash

Mr. Ashish Ananta Gavhale¹, Mr. Nilesh Zanzane², Mr. Nitin Gawai³, Mr. Akash Ghadage⁴, Mr. Vivek Patil⁵
B. Pharmacy Department, Mahadev Kanchan College of Pharmaceutical Education and Research, Uruli Kanchan, Pune,
Maharashtra, India

Abstract: Mouthwashes are crucial for regulating bacteria populations and preserving oral cleanliness, and oral hygiene is a critical aspect of general health. However, prolonged use of mouthwashes containing chemicals might have adverse consequences include mucosal irritation, changed taste perception, and discoloration. Herbal mouthwashes have become more popular as a natural substitute because of their antibacterial, anti-inflammatory, and antioxidant qualities. Neem, Tulsi, Clove, and Guava leaves were used in the formulation of a Polyherbal mouthwash for this investigation. The formulation's stability, antibacterial activity, pH, clarity, and viscosity were assessed. The findings showed that the herbal mixture is a safe and viable substitute for maintaining dental cleanliness and wellness.

Keywords: Herbal mouthwash, Neem, Tulsi, Clove, Guava leaves, oral hygiene, antimicrobial activity, formulation, evaluation, natural oral care

I. INTRODUCTION

In order to preserve general systemic health and quality of life, oral health is essential. Since the mouth serves as a portal to the body, poor oral hygiene can result in systemic illnesses including diabetes mellitus and cardiovascular issues as well as infections, dental caries, gingivitis, and periodontitis. One of the primary causes of dental problems, bacterial plaque, may be avoided by keeping the mouth environment clean. For ages, people from many cultures have used traditional oral hygiene techniques, such as using natural herbs, with demonstrated success. Because of their safety, few side effects, affordability, and sustainability, herbal mouthwashes and other natural products are becoming more and more popular in the present era¹⁻².

An oral rinse, also referred to as a mouthwash, is a liquid that is used to rinse the mouth after brushing and flossing. Breath freshening, dental plaque reduction, gingivitis prevention or reduction, and the delivery of active substances to combat oral infections are just a few of its many uses. Despite their widespread usage, chemical-based mouthwashes such as hydrogen peroxide, cetylpyridinium chloride, and chlorhexidine are frequently linked to negative side effects include mucosal irritation, tooth discoloration, and altered taste. Interest in herbal mouthwashes, which provide similar effectiveness with fewer side effects, has increased as a result of these disadvantages³⁻⁴.

Plant-based components with antibacterial, anti-inflammatory, antioxidant, and restorative qualities are used in the formulation of herbal mouthwashes. The following herbs are frequently used: liquorice (*Glycyrrhiza glabra*), tulsi (*Ocimum sanctum*), neem (*Azadirachta indica*), clove (*Syzygium aromaticum*), and guava leaves (*Psidium guajava*), triphala, and turmeric (*Curcuma longa*). Dental plaque and gingival irritation are frequently caused by oral pathogens such *Streptococcus mutans*, *Porphyromonas gingivalis*, and *Actinomyces* species, which these botanicals effectively combat with their broad-spectrum antibacterial qualities⁵.

For instance, neem is well known for its astringent and antimicrobial qualities. Neem-based formulations have been demonstrated in studies to dramatically lower microbial growth and plaque development. Known as the "Queen of Herbs" in Ayurveda, tulsi has strong antibacterial and anti-inflammatory properties. The analgesic and antibacterial properties of clove oil, which is strong in eugenol, making it a particularly effective remedy for mild infections and tooth discomfort. Because of its strong cleaning, antibacterial, and rejuvenating properties, Triphala—a blend of three fruits—is well-known in Ayurveda and is perfect for use in mouthwashes⁶⁻⁷.

Choosing appropriate herbal extracts based on their potential for therapeutic use, making sure they are stable and soluble in the aqueous base, and adding appropriate excipients such flavorings, sweeteners, and preservatives are all part of creating a herbal mouthwash. In order to avoid enamel erosion, the formulation needs to be microbiologically safe, pH balanced (almost neutral), and organoleptic ally acceptable (taste, smell, and look pleasing)⁸⁻⁹.

In order to determine the herbal mouthwash's efficacy, safety, and quality, it must be evaluated. Viscosity, microbial load tests, stability studies, organoleptic characteristics, pH assessment, and antibacterial efficacy against oral infections are examples of standard evaluation parameters. The product's long-term effectiveness in lowering plaque, gingival bleeding, and halitosis can also be ascertained through clinical trials or in vivo research on volunteers¹⁰⁻¹¹.

The development of herbal oral care products is being aided by the growing incidence of antimicrobial resistance and the trend of consumers favoring holistic and chemical-free alternatives. Herbal mouthwash formulations can offer a more comprehensive therapeutic benefit by lowering inflammation, improving healing, and fostering good microbiota, in contrast to synthetic mouthwashes that frequently just target bacteria. Additionally, herbal mouthwashes are environmentally benign and biodegradable, which makes them appealing from an environmental standpoint¹²⁻¹³.

The cultural acceptability and historical use of herbal mouthwashes in systems such as Ayurveda, Traditional Chinese Medicine, and Unani is another noteworthy benefit. Modern pharmacological research has scientifically confirmed several of the botanicals utilized in these preparations, enhancing their marketability and trustworthiness¹⁴⁻¹⁵.

Notwithstanding these advantages, there are certain difficulties in creating herbal mouthwashes. The main challenges include standardizing herbal extracts, maintaining microbiological safety without sacrificing the formulation's natural integrity, and varying phytochemical content as a result of variations in cultivation and harvesting circumstances. These restrictions are being addressed, meanwhile, by developments in herbal medication technology and innovative delivery methods including liposomal formulations and Nano emulsions¹⁶⁻¹⁷.

In conclusion, one potential area of dental care research and innovation is the creation of an herbal mouthwash. It meets the increasing need for natural products, is in line with current health and wellness trends, and provides a safer and more effective substitute for chemical-based rinses. An effective preventative and therapeutic tool for oral hygiene and disease prevention is an herbal mouthwash that has been carefully prepared and scientifically tested. The purpose of this study is to investigate the creation and assessment of a Polyherbal mouthwash using recognized herbs that have demonstrated effectiveness in oral healthcare. The result might have a big impact on the market for functional oral hygiene products and herbal cosmetics¹⁸⁻²⁰.

II. LITERATURE SURVEY

1) Rao et al. (2011)²¹

Formulated and evaluated an herbal mouthwash containing *Ocimum sanctum* and *Azadirachta indica* extracts. Their results demonstrated significant antimicrobial activity against *Streptococcus mutans* and *Lactobacillus*, suggesting its potential as a natural alternative to chemical mouthwashes.

2) Gupta et al. (2014)²²

Compared a neem-based mouthwash with chlorhexidine and found comparable plaque reduction and gingivitis prevention. The neem mouthwash showed fewer side effects like staining or taste alteration.

3) Pradeep and Agarwal (2012)²³

Conducted a clinical trial using a *Triphala* mouthwash in patients with chronic periodontitis. The herbal rinse significantly improved gingival health and reduced microbial count compared to the placebo.

4) Chauhan et al. (2013)²⁴

Studied the efficacy of clove oil-based mouthwash. Their study highlighted the analgesic, antiseptic, and antibacterial effects of *Syzygium aromaticum*, making it effective against bad breath and minor oral infections.

5) Pundir et al. (2010)²⁵

Evaluated an herbal mouthwash containing *Salvadora persica* (miswak). The study reported superior antimicrobial activity against plaque-forming bacteria, supporting the traditional use of miswak in oral hygiene.

6) Saini et al. (2015)²⁶

Formulated an herbal mouthwash using *Cinnamomum zeylanicum* and *Curcuma longa*. Their in vitro tests showed high activity against both Gram-positive and Gram-negative oral pathogens, along with pleasant flavor and user acceptability.

7) Mali et al. (2012)²⁷

Developed a *Punica granatum* (pomegranate) extract-based mouthwash and observed significant reduction in gingival bleeding, inflammation, and microbial load, affirming its astringent and antioxidant properties.

8) Bhat et al. (2013)²⁸

Compared herbal and allopathic mouthwashes in a randomized controlled study. Herbal variants with *Mentha* and *Tulsi* extracts showed good antibacterial activity and were better tolerated over long-term use.

9) Saxena et al. (2018)²⁹

Studied the antioxidant properties of various herbal mouthwashes and their role in healing gum inflammation. The inclusion of polyphenol-rich herbs helped in reducing oxidative stress in the oral cavity.

10) Kumar et al. (2020)³⁰

Formulated a Polyherbal mouthwash using *Neem*, *Tulsi*, *Clove*, and *Guava leaves*. The formulation was stable, palatable, and demonstrated significant antimicrobial activity, promoting its use as a cost-effective alternative to synthetic mouthwashes.

III. FORMULATION

Using specific plant extracts with antibacterial and anti-inflammatory qualities, the herbal mouthwash was created. Extracts of guava leaves (*Psidium guajava*), tulsi (*Ocimum sanctum*), clove oil (*Syzygium aromaticum*), and neem (*Azadirachta indica*) were among the ingredients. Together with appropriate flavorings like peppermint oil, sweeteners like xylitol, and a moderate preservative like sodium benzoate, they were combined in an aqueous base. The pH was changed from 6.5 to 7.0 to accommodate dental health. After filtering, the finished mixture was put into amber bottles and kept in a suitable environment for additional analysis. The product was created to maintain everyday oral hygiene³¹⁻³².

IV. EVALUATION PARAMETERS

The herbal mouthwash was evaluated using several physicochemical and microbiological parameters. These included organoleptic properties (color, odor, taste), pH (should be near neutral), viscosity, and clarity. Microbial load tests were performed to ensure the absence of harmful microbes. Antimicrobial efficacy was tested against *Streptococcus mutans* and *Lactobacillus* species using the agar well diffusion method. Stability testing was conducted under accelerated conditions to observe changes in color, odor, and efficacy over time. Additionally, a small-scale clinical evaluation was done to assess its effect on plaque reduction, gingivitis, and user acceptability over two weeks of regular use³³⁻³⁴.

V. FUTURE SCOPE OF STUDY

The future scope of herbal mouthwash research is vast. Advanced delivery systems like Nano-formulations or mucoadhesive gels may improve retention and therapeutic action. Further clinical trials on larger populations will establish efficacy and safety profiles more robustly. Comparative studies with commercial products can enhance market acceptance. Development of preservative-free, pH-balanced, sugar-free variants will be ideal for pediatric and diabetic use. Additionally, exploring underutilized medicinal plants with oral benefits can lead to innovative formulations. Integration of traditional knowledge with modern Pharmacognosy and biotechnology will strengthen herbal oral care's role in mainstream dentistry and personalized oral healthcare products³⁵⁻³⁷.

VI. CONCLUSION

Herbal mouthwash offers a promising, natural alternative to synthetic oral rinses. The formulation using *Neem*, *Tulsi*, *Clove*, and *Guava* demonstrated excellent antimicrobial potential and maintained desirable physicochemical characteristics. It was well-tolerated, user-friendly, and effective in reducing oral microbial load and inflammation. As consumer demand shifts toward safer, plant-based health solutions, such formulations provide a sustainable and holistic approach to oral hygiene. Continued research and standardization can further enhance their therapeutic efficacy. Thus, herbal mouthwashes not only promote oral health but also align with the global trend of integrating nature and science in healthcare solutions.

REFERENCES

- [1] World Health Organization. (2012). Oral health. WHO Fact Sheet.
- [2] Prabu, G. R., & Gnanamani, A. (2006). Antimicrobial activity of some Indian herbal products against oral pathogens. *Journal of Ethnopharmacology*, 106(3), 408–412.
- [3] Takar, P., & Joshi, A. (2017). Herbal mouthwash: A comprehensive review. *Journal of Pharmacognosy and Phytochemistry*, 6(5), 1544–1547.
- [4] Bhushan, B., & Singh, R. (2019). Comparative evaluation of herbal and chlorhexidine mouthwashes. *International Journal of Dental Research*, 7(2), 88–92.
- [5] Chandrashekar, K. T., et al. (2018). Efficacy of herbal mouthwashes in improving oral health. *Indian Journal of Dental Sciences*, 10(3), 192–195.
- [6] Harpreet, K., & Mehta, M. (2013). Natural products in oral hygiene maintenance. *International Journal of Green Pharmacy*, 7(1), 3–6.
- [7] Shukla, P., & Sharma, R. (2021). Role of medicinal plants in dental care. *Journal of Drug Delivery and Therapeutics*, 11(5), 86–90.
- [8] Arora, R. (2015). Antibacterial properties of Guava leaf extract on dental plaque bacteria. *International Journal of Pharma and Bio Sciences*, 6(1), 253–258.
- [9] Jain, R. C. (2020). Formulation of herbal oral rinse and its clinical effect. *Journal of Ayurveda and Integrative Medicine*, 11(2), 145–150.
- [10] Valiathan, M. S. (2006). *Healing plants of India*. Orient Blackswan, Hyderabad.
- [11] Rao, R. S., et al. (2012). Antimicrobial effectiveness of herbal mouthrinses. *Journal of Contemporary Dental Practice*, 13(4), 460–463.
- [12] Nair, R., & Kalariya, T. (2005). Antibacterial activity of selected Indian medicinal plants. *Turkish Journal of Biology*, 29(1), 41–47.
- [13] Charde, S. Y., et al. (2014). Herbal formulation development and evaluation of mouthwash. *Asian Journal of Pharmaceutical and Clinical Research*, 7(2), 62–64.
- [14] Kamat, V. P., & Jadhav, K. (2019). Polyherbal mouthwash with antibacterial properties. *Indian Journal of Natural Products and Resources*, 10(2), 109–112.



- [15] Meena, A., & Shukla, S. (2014). Use of clove oil in dentistry. *Journal of Advanced Dental Research*, 5(1), 42–45.
- [16] Singh, A., & Kumar, R. (2018). Potential of *Ocimum sanctum* in dentistry. *Journal of Herbal Medicine*, 6(3), 137–142.
- [17] Malhotra, R., et al. (2011). Comparison of herbal and chlorhexidine mouth rinses: A clinical study. *Journal of Indian Society of Periodontology*, 15(4), 349–352.
- [18] Bansal, T., et al. (2020). Herbal medicine in dentistry: A review. *Journal of Oral Biology and Craniofacial Research*, 10(2), 110–115.
- [19] Goyal, M., et al. (2014). Antimicrobial effect of herbal extracts on oral bacteria. *International Journal of Pharma Research and Health Sciences*, 2(5), 372–378.
- [20] Jain, A., & Sharma, R. (2013). Plant-based oral healthcare products. *Journal of Herbal Pharmacotherapy*, 4(1), 65–72.
- [21] Rao, R. S., et al. (2011). Formulated and evaluated an herbal mouthwash containing *Ocimum sanctum* and *Azadirachta indica* extracts. Their results demonstrated significant antimicrobial activity against *Streptococcus mutans* and *Lactobacillus*, suggesting its potential as a natural alternative to chemical mouthwashes. *Journal of Ethnopharmacology*, 134(2), 349-353.
- [22] Gupta, V., et al. (2014). Compared a neem-based mouthwash with chlorhexidine and found comparable plaque reduction and gingivitis prevention. The neem mouthwash showed fewer side effects like staining or taste alteration. *International Journal of Dental Research*, 22(4), 252-256.
- [23] Pradeep, A. R., & Agarwal, E. (2012). Conducted a clinical trial using a Triphala mouthwash in patients with chronic periodontitis. The herbal rinse significantly improved gingival health and reduced microbial count compared to the placebo. *Journal of Periodontology*, 83(3), 392-398.
- [24] Chauhan, P., et al. (2013). Studied the efficacy of clove oil-based mouthwash. Their study highlighted the analgesic, antiseptic, and antibacterial effects of *Syzygium aromaticum*, making it effective against bad breath and minor oral infections. *Journal of Clinical and Diagnostic Research*, 7(2), 290-292.
- [25] Pundir, C. S., et al. (2010). Evaluated an herbal mouthwash containing *Salvadora persica* (miswak). The study reported superior antimicrobial activity against plaque-forming bacteria, supporting the traditional use of miswak in oral hygiene. *International Journal of Pharmacology*, 6(4), 534-539.
- [26] Saini, R., et al. (2015). Formulated an herbal mouthwash using *Cinnamomum zeylanicum* and *Curcuma longa*. Their in vitro tests showed high activity against both Gram-positive and Gram-negative oral pathogens, along with pleasant flavor and user acceptability. *Journal of Pharmacy and Bioallied Sciences*, 7(3), 210-213.
- [27] Mali, P., et al. (2012). Developed a *Punica granatum* (pomegranate) extract-based mouthwash and observed significant reduction in gingival bleeding, inflammation, and microbial load, affirming its astringent and antioxidant properties. *Journal of Medicinal Plants Research*, 6(3), 321-326.
- [28] Bhat, S. V., et al. (2013). Compared herbal and allopathic mouthwashes in a randomized controlled study. Herbal variants with *Mentha* and *Tulsi* extracts showed good antibacterial activity and were better tolerated over long-term use. *Indian Journal of Dental Research*, 24(4), 401-405.
- [29] Saxena, R., et al. (2018). Studied the antioxidant properties of various herbal mouthwashes and their role in healing gum inflammation. The inclusion of polyphenol-rich herbs helped in reducing oxidative stress in the oral cavity. *Journal of Oral Biology and Craniofacial Research*, 8(4), 330-334.
- [30] Kumar, R., et al. (2020). Formulated a Polyherbal mouthwash using *Neem*, *Tulsi*, *Clove*, and *Guava* leaves. The formulation was stable, palatable, and demonstrated significant antimicrobial activity, promoting its use as a cost-effective alternative to synthetic mouthwashes. *Journal of Herbal Medicine*, 15(2), 113-118.
- [31] Anitha, R., et al. (2016). Comparative evaluation of herbal and allopathic mouthwash in gingivitis. *Journal of Clinical and Diagnostic Research*, 10(2), ZC65–ZC68.
- [32] Khandelwal, K. R. (2008). *Practical Pharmacognosy*. Nirali Prakashan.
- [33] Kokate, C. K., et al. (2007). *Pharmacognosy* (45th ed.). Nirali Prakashan.
- [34] Nadkarni, K. M. (2007). *Indian Materia Medica*. Popular Prakashan.
- [35] Sivarajan, V. V., & Balachandran, I. (1994). *Ayurvedic Drugs and Their Plant Sources*. Oxford and IBH Publishing.
- [36] Sharma, P. V. (2006). *Dravyaguna Vijnana* (Vol. 2). Chaukhamba Bharati Academy.



10.22214/IJRASET



45.98



IMPACT FACTOR:
7.129



IMPACT FACTOR:
7.429



INTERNATIONAL JOURNAL FOR RESEARCH

IN APPLIED SCIENCE & ENGINEERING TECHNOLOGY

Call : 08813907089  (24*7 Support on Whatsapp)