

Oral Rinse | Chlorhexidine Gluconate 0.12% w/v House Standard



OFFICE USE
 Mint
 500 mL ORO-CLEAR-S
 4 L ORO-CLEAR-O
HOME USE
 227 mL ORO-CLEAR-SXS



OFFICE USE
 Mint
 500 mL SKU: OC-S
 4 L SKU: OC-O
HOME USE
 227 mL SKU: OC-SXS

Sweetened with Xylitol. Great Taste = Healthy Smiles



made in
Canada

- Broad Spectrum antimicrobial rinse
- Ideal treatment of moderate to severe gingivitis
- Helps reduce the redness and swelling of gums
- Helps control bleeding gums
- Inhibits the formation of new plaque
- Ideal pre + post procedural/surgical rinse

Chlorhexidine gluconate (CHG) is one of the most widely investigated and used oral products¹

- It is considered the GOLD standard agent for its anti-plaque and anti-gingival effects
- The advantage of chlorhexidine over other cationic agents is that it can bind strongly to many sites in the oral cavity and is released slowly over 12 hours after rinsing, thus providing considerable substantivity and a sustained antimicrobial effect restricting bacterial proliferation²
- ORO Clense and ORO Clear are an ideal pre-procedural rinse. Use of chlorhexidine mouthwash before patient treatment has been shown to significantly reduce the bacterial count in the air of the operatory. Reduced splatter and aerosols minimizes the risk of infection to dental personnel and other people in the dental office³

1. Joanna Asadoorian. CDHA Position Paper on Commercially Available Over-the-Counter Oral Rinsing Products. Canadian Journal of Dental Hygiene (CJDH) 2016;50(3) 126-139.

2. Reda, B., Hollemeyer, K., Trautmann, S., Volmer, D. A., & Hannig, M. (2021). First insights into chlorhexidine retention in the oral cavity after application of different regimens. Clinical oral investigations, 25(11), 6109–6118. <https://doi.org/10.1007/s00784-021-03910-y>

3. Harrel SK, Molinari J. Aerosols and Splatter in Dentistry: A brief review of the literature and infection control implications. JADA 2004; 135:434-436.

ORO Clear™ DIN 02291096

ORO Clense™ DIN 02209055

Oral Rinse | Chlorhexidine Gluconate 0.12% w/v
House Standard

Antigingivitis | Antimicrobial Oral Rinse

Prescription oral rinse specifically formulated to kill bacteria associated with gingivitis

It Works	ORO Clear and ORO Clense treats moderate to severe gingivitis, and manages associated gingival bleeding and inflammation between dental visits.
	Rinsing with ORO Clear or ORO Clense inhibits the build up and maturation of plaque by reducing certain microbes regarded as gingival pathogens thereby reducing gingivitis.
	ORO Clear and ORO Clense compliments crown and bridge work by minimizing repeated retraction and procedures as well as reducing plaque that can complicate crown settings.
It Lasts	ORO Clense and ORO Clear bind to mucosal tissue (hydroxyapatite, pellicle, salivary glycoprotein and mucous membranes) to achieve residual antimicrobial activity for several hours. Exerts bacteriostatic effect as the CHG is gradually released from retention sites. Residual retention for 4–12 hours.
It's Safe	Studies conducted demonstrate that any ingested chlorhexidine gluconate is poorly absorbed from the gastrointestinal tract. Excess is excreted through body wastes, ensuring patient safety.

ORO Clense and ORO Clear are ideal for:

- Immuno-compromised patients
- Reduction of post-surgical inflammation
- Reduction of high streptococcus mutans level
- Reduction of periodontal organisms⁴
- Sub-gingival and supra-gingival irrigation⁵
- Reduction of dry socket resulting from third molar surgery⁶

Dispensing ORO Clense or ORO Clear in office is beneficial:

- Treatment can begin immediately
- Saves patient time and money at the pharmacy
- Ensures patients get your specific prescribed product



To order ORO Clear/ORO Clense or for more information, contact your District Sales Manager or Germiphene at 1.800.265.9931 | info@germiphene.com | www.germiphene.com

4. Sanz, M., Newman, M. G., Anderson, L., Matoska, W., Otomo-Corgel, J., & Saltini, C. (1989). Clinical enhancement of post-periodontal surgical therapy by a 0.12% chlorhexidine gluconate mouthrinse. *Journal of periodontology*, 60(10), 570–576. <https://doi.org/10.1902/jop.1989.60.10.570>

5. Flemmig, T. F., Newman, M. G., Doherty, F. M., Grossman, E., Meckel, A. H., & Bakdash, M. B. (1990). Supragingival irrigation with 0.06% chlorhexidine in naturally occurring gingivitis. I. 6 month clinical observations. *Journal of periodontology*, 61(2), 112–117. <https://doi.org/10.1902/jop.1990.61.2.112>

6. Daly, B., Sharif, M. O., Newton, T., Jones, K., & Worthington, H. V. (2012). Local interventions for the management of alveolar osteitis (dry socket). *The Cochrane database of systematic reviews*, 12, CD006968. <https://doi.org/10.1002/14651858.CD006968.pub2>