



Antimicrobial Activity and Cytotoxicity of Mouthwash Prepared from *Azadirachta indica* and *Stevia rebaudiana* Extract– An *In vitro* Study

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Authors' contributions

This work was carried out in collaboration among all authors. Author BM designed the study, performed the methods and wrote the first draft of the manuscript and author RP performed the statistical analysis and wrote the protocol. Author SRK managed the analyses of the study and managed the literature searches and author PS managed the final drafting and editing of the manuscript. All authors read and approved the final manuscript.

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ABSTRACT

Introduction: Mouth wash are generally utilized as subordinates to oral cleanliness and in the conveyance of dynamic specialists to the teeth and gums. These flushes can impact plaque development and adjust the course of gingival irritation. *Azadirachta indica* (Neem) was utilized to treat different skin illnesses, as a disinfectant substance and as a natural mouthwash. *Stevia rebaudiana* can inhibit the growth of microorganisms that are responsible for dental caries.

Aim: This study aimed to assess the antimicrobial activity and cytotoxicity from *Neem and Stevia* based Mouthwash.

Materials and Methods: Plant extract was prepared and an antimicrobial and cytotoxic effect was done by considering various parameters. The antimicrobial activity of nanoparticles prepared using plant extract was investigated and the results of the test were described as the standard deviation and analyzed. For the cytotoxic activity, an ELISA plate was used, wherein the mortality rate of the

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nauplii was estimated with the plant extract mediated nanoparticles at different concentrations. Data's were statistically analyzed by Spearman correlation through SPSS version 23.

Results: Anti-microbial activity showed positive correlation with increase in concentration ($r=1$). The cytotoxic activity showed negative correlation with the number of live nauplii decreased in the second day when compared to the first day suggesting that the extract has potent cytotoxic activity ($r=-1$).

Conclusion: Neem and *Stevia* extract helped us to detect the antimicrobial activity and cytotoxic effect on the various species in different concentration levels. The study needs to be evaluated further for isolating the possible compounds to test the effectiveness of antimicrobial activity in the oral cavity of the human body to prevent various diseases.

Keywords: *Azadirachta indica*; *Stevia rebaudiana*; mouthwash; cytotoxicity; antimicrobial activity; green synthesis.

1. INTRODUCTION

Mouthwashes are commonly recommended by dentists for the prevention and treatment of a variety of oral diseases. Mouth rinses are generally utilized as subordinates to oral cleanliness and in the conveyance of dynamic specialists to the teeth and gums. These flushes can impact plaque development and adjust the course of gingival irritation [1-4]. Some ingredients that act as digestive aids are also found in mouthwash. Today, we use an industrial mouthwash containing several chemical compounds that are toxic to our oral cavities such as thymol, methyl salicylate, and hydrogen peroxide [5-9]. The majority of industrial mouth rinses use alcohol to destroy bacteria, and anyone who has used an alcohol-based mouthwash knows how irritating it could be. Although alcohol can be beneficial in a short term, it eventually causes our bodies to develop resistance to the antibiotics present in these mouthwashes [10-13]. Some medications, chemotherapy, and lifestyle decisions could cause dry mouth (xerostomia). The use of an alcohol-based mouth rinse regularly would cause a reduction in saliva production [14-16]. The main objective of this study is to demonstrate the new herbal combination that could be a better alternative to chlorhexidine.

The previously known utilization of *Neem* by the Harappan culture in old India goes back 4500 years. The historical backdrop of the *Neem* tree is inseparably connected to the historical backdrop of the Indian lifestyle. *Neem* helps in treating different skin illness, as a disinfectant substance and as a natural mouthwash. Dental caries are a human multifactorial infection that has influenced many populations all across the globe extensively. In recent years, *Azadirachta indica*, commonly known as *Neem*, has gained

worldwide prominence due to its wide range of medicinal properties [17-20]. About 150 compounds have been isolated from different components of *Neem* to display various properties like immunomodulatory, anti-inflammatory, antihyperglycemic, anti-fungal, antibacterial and cytotoxicity [21-25]. On the inhibitory activity of *Neem* and *Stevia* extract on *Streptococcus mutans*, multiple cross-sectional and longitudinal studies have been performed to date. The study also determines the minimum inhibitory concentration of herbal mouthwashes prepared from *Neem* against *Streptococcus mutans*. Previous studies have shown that herbal mouthwashes prevent bacterial infections and dental caries. But, the procedure for salivary analysis of pH and bacteria count had no clarity because there was a lag in the sampling method. Previous studies concluded that *Stevia rebaudiana* reduced the acidic pH and improved the buffering capacity in high-risk individuals [26-29].

Stevia rebaudiana is a plant that has medicinal value and was used as a cure for a great range of ailments and sweeteners in ancient times. *Stevia* has both sensory and functional properties superior to other plant extracts [30-34]. *Stevia* can inhibit the growth of microorganisms that are responsible for dental caries. The herbal mouthwash with antimicrobial properties could prevent the growth of bacteria-like organisms and prevents infection [35-39]. Therefore this study was designed to assess the clinical efficacy of the herbal mouthwash. Natural mouthwashes are gentle for even sensitive oral health. This natural herbal mouthwash has antimicrobial properties and has no harsh additives [40-42]. So, here an In vitro experiment has been carried out so far to test the antibacterial efficacy and cytotoxicity of *Azadirachta indica* and *Stevia rebaudiana*.

2. MATERIALS AND METHODS

2.1 Preparation of Plant Extract

Fresh powdered extract of 2.5 grams *Neem* and *Stevia* was added to 100 ml of distilled water to the beaker and boiled for 10-20 minutes in the heating mantle. The boiled extract was filtered using filter paper. (Fig. 1)

Freshly powdered extract of 2.5 grams *Neem* and *Stevia* was added with a ratio of 1:1 to 100 ml of distilled water to the beaker and boiled for 10-20 minutes in the heating mantle. The boiled extract was filtered using filter paper.

2.2 Cytotoxic Activity

2.2.1 Saltwater Preparation

2g of iodine-free salt was weighed and dissolved in 200ml of distilled water. Six well ELISA plates were taken and 10-12 ml of saline water was filled. To that ten nauplii were slowly added to each well (20 μ L, 40 μ L, 60 μ L, 80 μ L, 100 μ L). Then the nanoparticles were added according to

the concentration level. The plates were incubated for 24 hours (Fig. 2). After 24 hours, the ELISA plates were observed and noted for the number of live nauplii present and calculated by using the following formula,

A number of dead nauplii/Number of dead nauplii + number of live nauplii \times 100.

Validation was done by nano experts. Spearman correlation analysis was done using SPSS software version 23.

2.3 Antimicrobial Activity

Antibacterial action against *Staphylococcus aureus*, *Streptococcus aureus*, *C. albicans* and *E. foecalis* strains of the respective nanoparticles was evaluated with the zone of inhibition, Muller Hilton Agar (MHA) was used for this operation. Micro pipetting can be done with caution to prevent biasing and previously collected reference values that are used for comparison. Multiple culture plate study has to be done. MHA was prepared and sterilized at 120lbs for 45 minutes. The media poured into the sterilized plates and allowed solidification to remain stable.

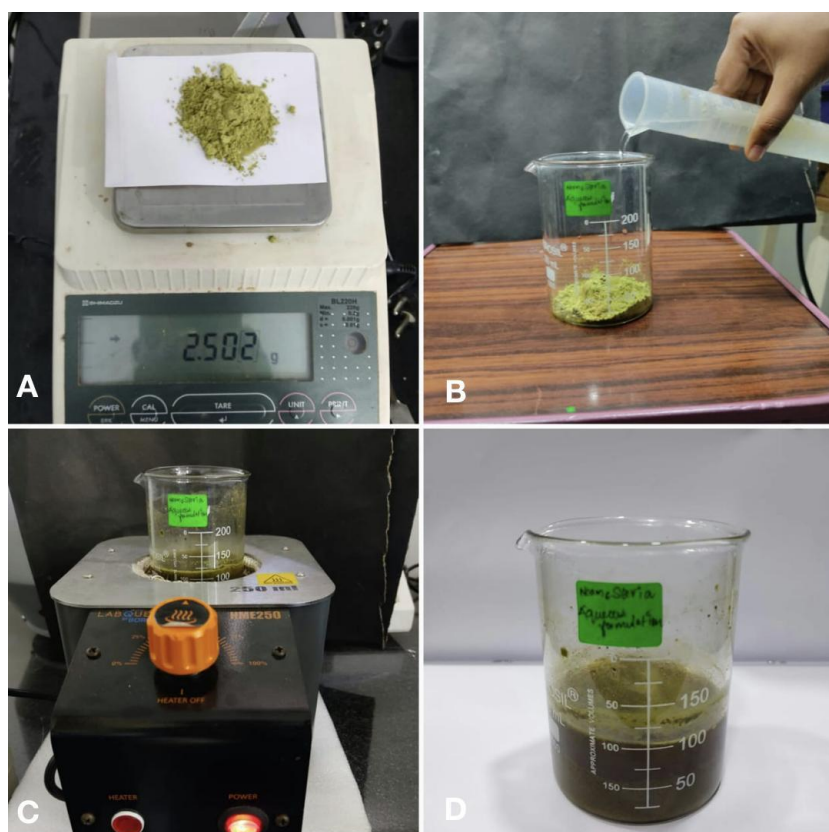


Fig. 1. A) Represents 2.5gms of *Neem* that has been measured in a weighing machine B) addition of distilled water into the extract, C) aqueous formulation of *Neem* and *Stevia* boiling at 60-70 degrees Celsius, D) *Neem* and *Stevia* extract formulation

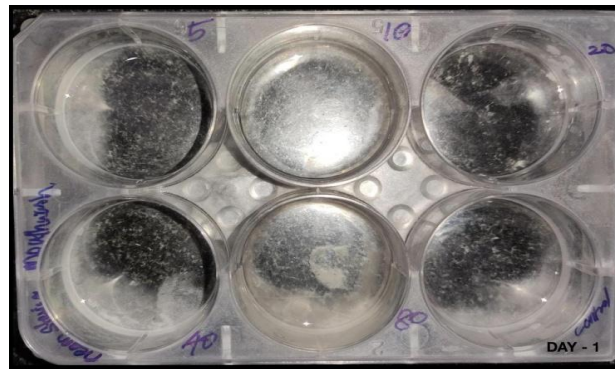


Fig. 2. Image showing analysis of cytotoxic activity using Neem and Stevia mediated nanoparticles of day 1 activity with 10 nauplii in each well

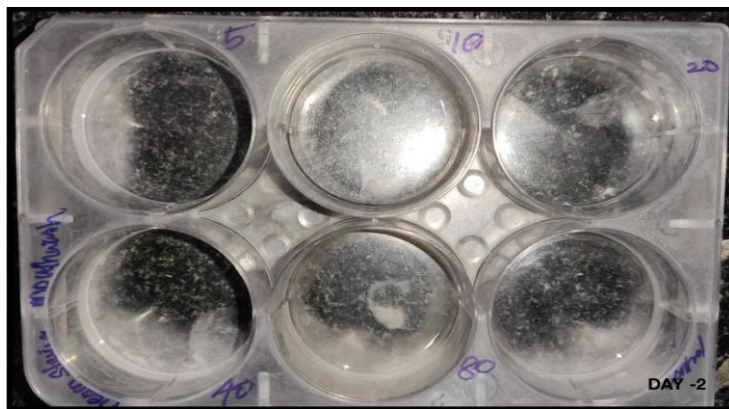


Fig. 3. Image showing the analysis of cytotoxic activity using Neem and Stevia mediated nanoparticles of day 2 activity. At 5 µl concentration, there were nine live nauplii present, eight nauplii at 10 µl concentration, seven nauplii were found alive in both 20 µl and 40 µl concentration, none of the nauplii were alive in 80µl concentration

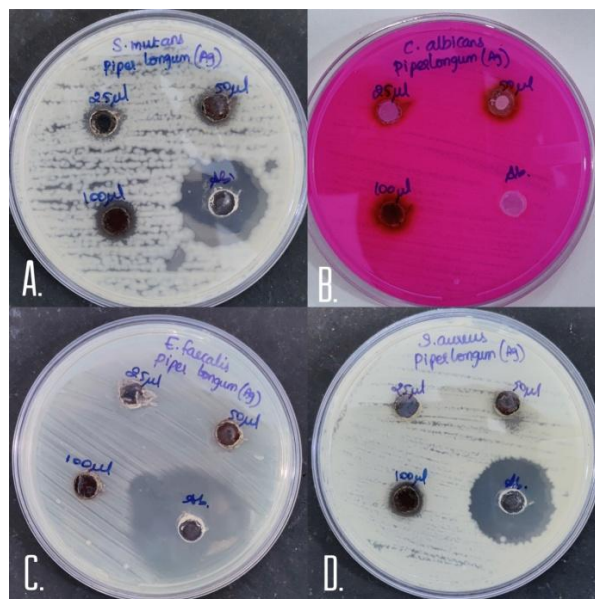


Fig. 4. Antimicrobial activity observed in agar plates containing different microorganisms, A) Zone of inhibition of *S.mutans*, B) Zone of inhibition of *C.albicans* C) Zone of inhibition of *E.faecalis* D) Zone of inhibition of *S.aureus*

3. RESULTS

Cytotoxic activity in herbal mouthwash, four different concentrations have been taken in the study (5 μ l, 10 μ l, 20 μ l, 80 μ l, control). At each concentration, 10 nauplii (live nauplii) have been dropped. *Artemia* nauplii is a stage of copepod life cycle of larvae is inexpensive, easy available, and can be used for short term study. On day 1, all the 10 nauplii were alive in all the concentration levels (Figure 5). On day 2, the significant increase in the concentration, decreased the nauplii count in the extract (Figure 6). This clearly showed the influence of the cytotoxic effect in the solution. The count of nauplii remains alive on the first day of study in all five concentration levels. At 5 μ l concentration, the live nauplii count decreased from ten to nine in number. At 10 μ l concentration, the live nauplii count reduced to eight in number. At 20 μ l concentration, the live nauplii count was seven in number. In 40 μ l concentration, the live nauplii count remained as seven and finally, at 80 μ l concentration, none of the nauplii were alive. This massive variation in the nauplii count in various concentration levels proved the presence of cytotoxicity (Fig. 7). Spearman correlation analysis reveals a negative correlation with the rise in concentration and decrease in the number of live nauplii ($r=-1$) which reveal the effective cytotoxic activity of *Azadirachta indica* and *Stevia rebaudiana* extract based mouth wash.

For the Antimicrobial activity, four different species have been taken. *Enterococcus faecalis*, *Staphylococcus aureus*, *Streptococcus mutans*, and *Candida albicans* were the four different species that were taken as a sample in this experiment. All these four species were allowed to concentrate in four different concentrated solutions (25 μ l, 50 μ l, 100 μ l, 150 μ l). The zone of inhibition increased as the concentration level increased. At 25 μ l concentration, four different species exhibited four different zones of inhibition. *Enterococcus faecalis* showed a value of 15mm, *Staphylococcus aureus* exhibited 13mm, *Streptococcus mutans* value was recorded as 15mm and *Candida albicans* showed till 13mm of the zone of inhibition. *C.albicans* showed a maximum zone of inhibition at 100 μ l concentration. So, here there was consistency in zones of inhibition found in the study.

At 50 μ l concentration level, *Enterococcus faecalis* showed 17 mm, *Candida albicans* showed 15 mm of the zone of inhibition as in 25 μ l concentration level. *Staphylococcus aureus*

and *Streptococcus mutans* showed similar values of 20mm of the zone of inhibition at 50 μ l concentration level. At 100 μ l concentration level, the zone of inhibition gradually increased for all 4 species. For *Enterococcus faecalis*, the zone of inhibition was 20mm. For *Staphylococcus aureus*, the zone of inhibition was 23mm and for *Streptococcus mutans*, the zone of inhibition was 27 mm and for *Candida albicans*, the zone of inhibition was recorded as 25 mm.

At 150 μ l concentration level, the zone of inhibition for *Enterococcus faecalis* was 35mm, For *Staphylococcus aureus*, 25 mm was the zone of inhibition value and for *Streptococcus mutans*, the zone of inhibition was recorded as 27 mm. So, for all three bacterial species, there was a sign in the zone of inhibition levels but *Candida albicans* showed the antagonistic effect in the antimicrobial activity. At 150 μ l concentration, the *Candida albicans* species showed a 12mm zone of inhibition (Fig. 8). This clearly showed that the herbal mouthwash prepared in the laboratory would inhibit the growth of bacteria in the oral cavity but not the fungal infections. So, the prepared mouthwash showed a minimum resistance to fungal infections.

4. DISCUSSION

The present study showed an effective antimicrobial and cytotoxic activity of *Azadirachta indica* and *Stevia* based green synthetic mouth wash. The antimicrobial activity was more effective in *E.foecalis* with a maximum zone of inhibition of 35mm at 150 μ l concentration. Similar study done by Kishore et al (2021) using silver nanoparticles synthesized from *Piper longum* extract and its antimicrobial activity were analyzed at various concentration (25 μ l, 50 μ l, 100 μ l) against pathogens were the zone of inhibition was maximum for *C. albicans* [43]. Barma et al. analyzed the antibacterial activity of Silica nanoparticles against *E.foecalis*, *S.mutans* and *S.aureus* were mouthwash that has been incorporated showed effective antibacterial activity against gram positive pathogens [44]. Cytotoxic activity of *Azadirachta indica* and *Stevia* based green synthetic mouth wash showed an effective activity with decrease in number of nauplii with rise in concentration. Similar study, on cytotoxic activity of mouthwash from Lycopene-Chitosan nanocomposite revealed increased mortality rate in brine shrimp lethality assay and showed results directly proportional to the concentration of the Nanocomposite [45].

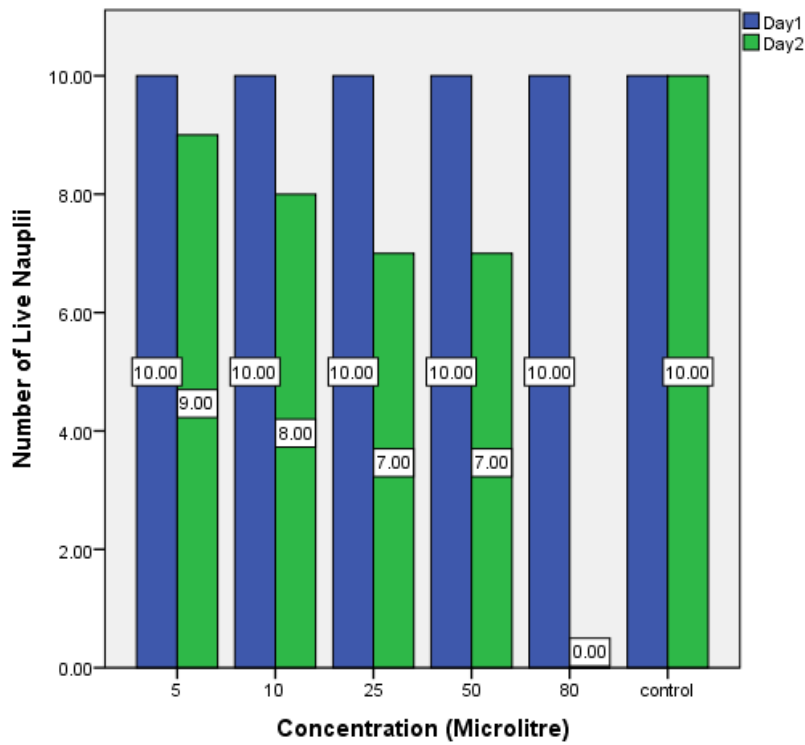


Fig. 5. Graph represents negative correlation ($r=-1$) of cytotoxic effect of the plant extract. The X-axis represents various concentration levels and the Y-axis represents the presence of a number of live nauplii. At 5 μ l – nine nauplii were alive, 10 μ l -eight nauplii were alive, 20 μ l, 40 μ l-seven nauplii were alive and 80 μ l- none of the nauplii were alive

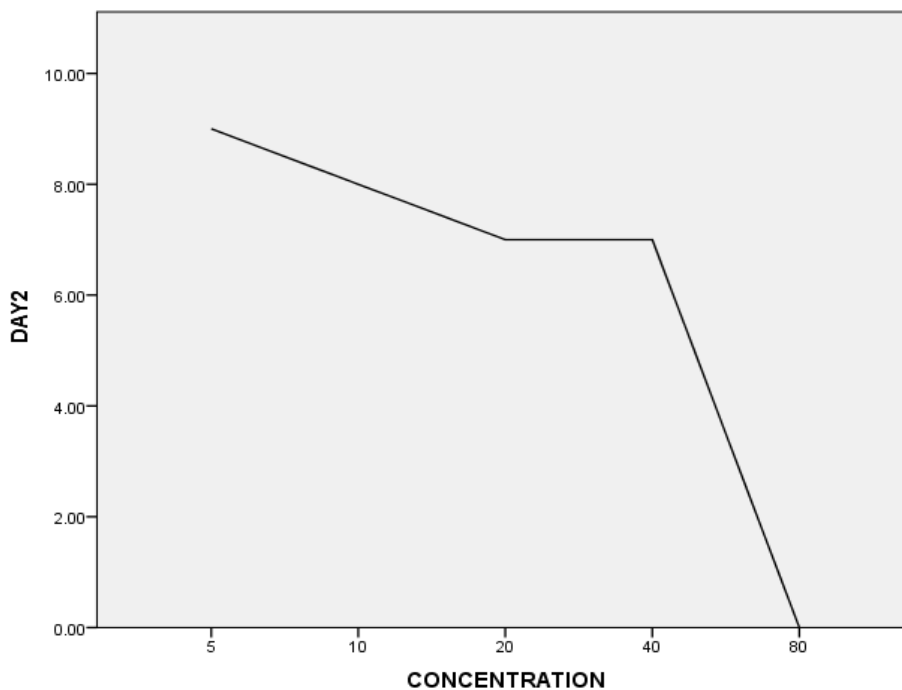


Fig. 6. The given line diagram represents the day 2 activity of the cytotoxic effect of plant extract. The X-axis represents the different concentration levels (Microlitre) and the Y-axis represents the decrease in a number of nauplii present

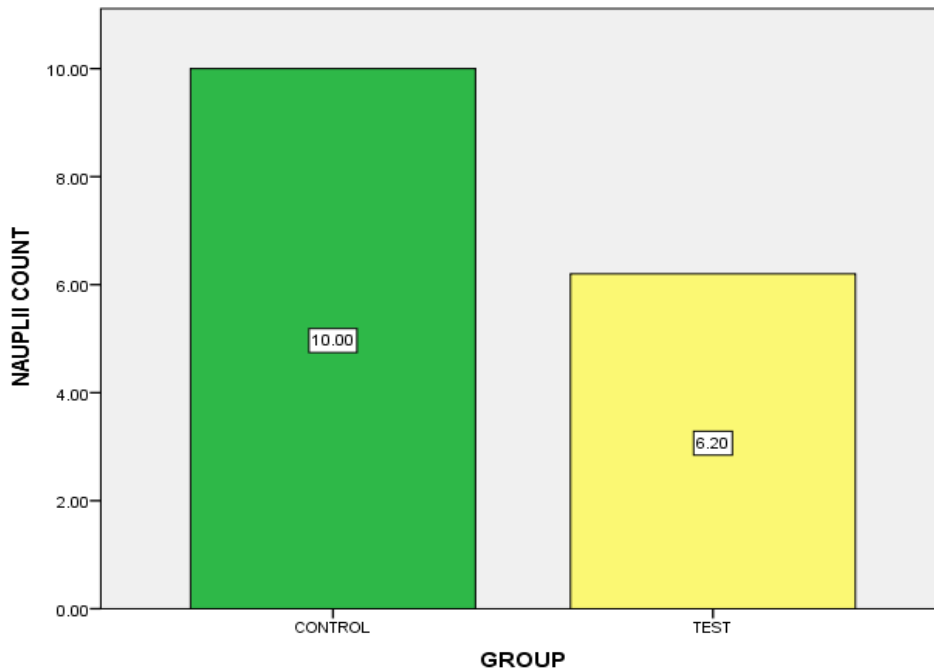


Fig. 7. The given bar graph represents the total mean value of the cytotoxic effect of plant extract. The X-axis represents the control and test group and the Y-axis represents the number of nauplii present

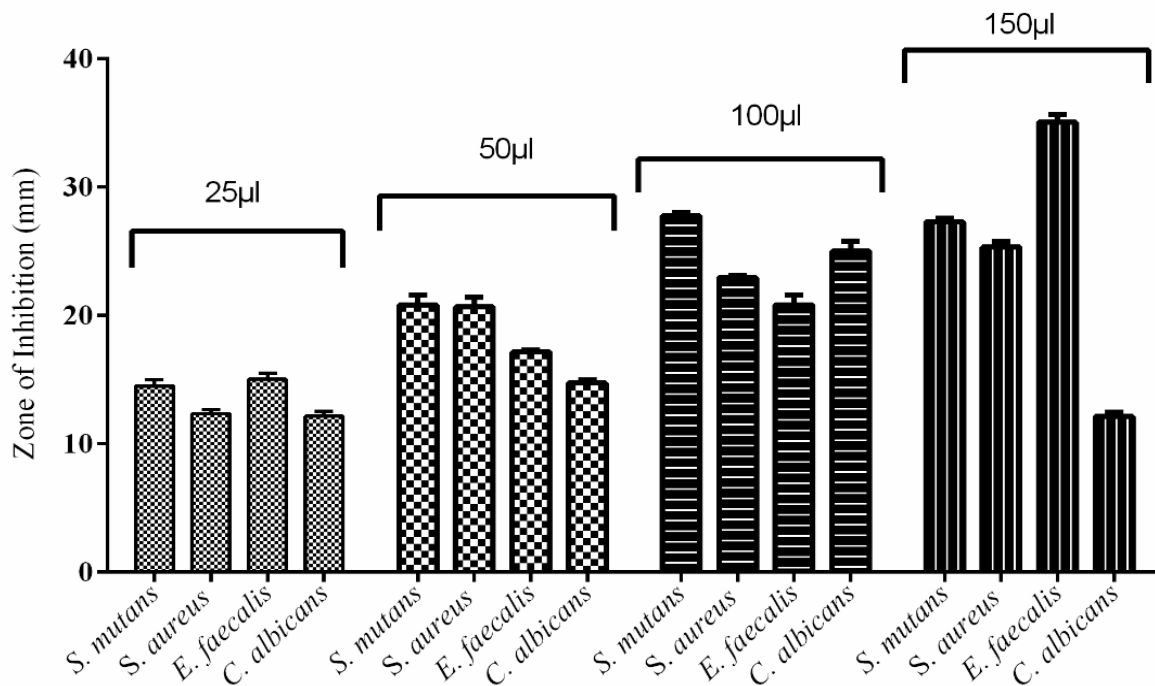


Fig. 8. Graph represents the antimicrobial activity of *Neem* and *Stevia* mediated nanoparticles. The percentage of a zone of inhibition in Millimeter(mm) and different concentration levels of the plant extract are represented. The X-axis shows concentration (microlitre), the Y-axis shows the percentage of a zone of inhibition (mm). At 150 µl *Enterococcus faecalis* showed an increased zone of inhibition

As per the CAMBRA guidelines (Caries management by risk assessment), Antimicrobial mouthwash is an important caries preventive therapy. Herbal mouthwashes have control of dental caries in high-risk individuals. In this study, there was a statistically significant difference in the mean parameters. So from the following references, the previous studies showed very less evidence in vitro effect of *Neem and Stevia* extract (Figure 8). The current findings are the first randomized trial and meta-analysis to examine the therapeutic benefits of herbal mouthwashes as an alternative to maintain oral hygiene. Some results revealed a lot of variabilities, which may be attributed to variations in baseline indices across experiments [27,46,47]. There are few drawbacks such as teeth staining, increased alcoholic content, taste fluctuations, xerostomia, and stability problems in commercially available liquid mouthwashes containing synthetic active ingredients. Minimum sample size was the major limitation in the study. Further clinical trials have to be done to test the antimicrobial and cytotoxic activity. Further invitro study, has to be carried out on anti-diabetic and anti-inflammatory activity of *Neem and Stevia* extract. Our team has extensive knowledge and research experience that has translate into high quality publications [48-65].

5. CONCLUSION

Neem and *Stevia* extract helped us to detect the antimicrobial activity and cytotoxic effect of various species at different concentration levels. This results explore us to the development of new antimicrobial biomedicine. Further clinical trials on animal model is essential for ensuring its safer clinical application.

CONSENT

It is not applicable.

ETHICAL APPROVAL

It is not applicable.

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COMPETING INTERESTS

Authors have declared that no competing interests exist.

REFERENCES

1. Van Dijck C, Tsoumanis A, Rotsaert A, Vuylsteke B, Van den Bossche D, Paeleman E, et al. Antibacterial mouthwash to prevent sexually transmitted infections in men who have sex with men taking HIV pre-exposure prophylaxis (PReGo): a randomised, placebo-controlled, crossover trial. *Lancet Infect Dis*; 2021. Available: [http://dx.doi.org/10.1016/S1473-3099\(20\)30778-7](http://dx.doi.org/10.1016/S1473-3099(20)30778-7)
2. Chow EPF, Williamson DA, Hocking JS, Law MG, Maddaford K, Bradshaw CS, et al. Antiseptic mouthwash for gonorrhoea prevention (OMEGA): a randomised, double-blind, parallel-group, multicentre trial. *Lancet Infect Dis*; 2021. Available:[http://dx.doi.org/10.1016/S1473-3099\(20\)30704-0](http://dx.doi.org/10.1016/S1473-3099(20)30704-0)
3. DA Fonseca Orcina B, Vilhena FV, Cardoso de Oliveira R, Marques da Costa Alves L, Araki K, Toma SH, et al. A Phthalocyanine Derivate Mouthwash to Gargling/Rinsing as an Option to Reduce Clinical Symptoms of COVID-19: Case Series. *Clin Cosmet Investig Dent*. 2021;13:47–50.
4. Imran E, Khurshid Z, Adanir N, Ashi H, Almarzouki N, Baeshen HA. Dental Practitioners' Knowledge, Attitude and Practices for Mouthwash Use Amidst the COVID-19 Pandemic. *Risk Manag Healthc Policy*. 2021;14:605–18.
5. Berrout J, Dahlbeck S, Rotino G, Nguyen D, Figueroa J. Treatment with Herbal Mouthwash Mediates Improvement of Symptoms in Xerostomia and Oral

- Mucositis patients. *Journal of Nutritional Biology*. 2018;4:202–6.
Available:<http://dx.doi.org/10.18314/jnb.v4i2.1060>
6. Alkasso IR, Taqa G, Al qassar S. Effect of Herbal Mouthwash on Salivary pH in Orthodontic Patients [Internet]. Vol. 20, Al-Rafidain Dental Journal. 2020;55–62.
Available:<http://dx.doi.org/10.33899/rden.2020.164525>
 7. Alkasso I, Taqa G, Al qassar S. Chlorohexidine vs Herbal mouthwash effects on Salivary pH in Orthodontic patients [Internet]. Vol. 20, Al-Rafidain Dental Journal. 2020;63–72.
Available:<http://dx.doi.org/10.33899/rden.2020.164523>
 8. Torkan S. Comparison of the Effects of an Herbal Mouthwash with Chlorhexidine on Surface Bacteria Counts of Dental Plaque in Dogs [Internet]. Vol. 12, Biosciences Biotechnology Research Asia. 2015;955–9.
Available:<http://dx.doi.org/10.13005/bbra/1745>
 9. Zhang J, Feng J, Liu Y. Preventive effect and safety of Chinese herbal medicine mouthwash in chemotherapy-induced oral mucositis: A protocol for systematic review and meta analysis. *Medicine*. 2020;99(49):e23387.
 10. Cheraghi M, Babadi F. Antibacterial Effects of Oak Fruit, Jaft, and Jaftex Herbal Mouthwash: A Review.
Available:<http://dx.doi.org/10.21203/rs.2.11341/v1>
 11. Oktanauli P. The Effect of Herbal Mouthwash against Halitosis in Elderly. *Jurnal Ilmiah dan Teknologi Kedokteran Gigi*. 2020;16:25.
Available:<http://dx.doi.org/10.32509/jitekgi.v16i1.611>
 12. Harsha L, Brundha MP. Prevalence of Dental Developmental Anomalies among Men and Women and its Psychological Effect in a Given Population. *Journal of Pharmaceutical Sciences and Research; Cuddalore*. 2017;9(6):869–73.
 13. Timothy CN, Samyuktha PS, Brundha MP. Dental pulp Stem Cells in Regenerative Medicine--A Literature Review. *Research Journal of Pharmacy and Technology*. 2019;12(8):4052–6.
 14. Vishwakarma P, Khobragade V, Dodamani A, Jain V, Mali G, Kshirsagar M. Comparative evaluation of indigenous herbal mouthwash with 0.2% chlorhexidine gluconate mouthwash in prevention of plaque and gingivitis: A clinico-microbiological study. *Journal of Indian Association of Public Health Dentistry*. 2020;18:111.
Available:http://dx.doi.org/10.4103/jiaphd.jiaphd_132_19
 15. Dalmia S, Aher G, Gulve M, Samuel R, Kolhe S. Comparative evaluation of the effect of chlorhexidine based mouthwash and herbal mouthwash on the microhardness of two different composite resins – An In Vitro Study. *International Journal of Advanced Research*. 2018;6:306–11.
Available:<http://dx.doi.org/10.21474/ijar01/6679>
 16. Aspalli S, Pal M, Desai A, Ramya B, Singh S. Comparison Of The Antigingivitis And Antiplaque Efficacy Of The Herbal Mouthwash With Allopathic Mouthwash: A Clinical Study [Internet]. Vol. 9, *International Journal of Research in Ayurveda and Pharmacy*. 2018;107–10.
Available: <http://dx.doi.org/10.7897/2277-4343.09371>
 17. Datta A. Functionality of *Azadirachta indica* A. Juss (neem) in beverages [Internet]. Available:<http://dx.doi.org/10.32469/10355/59828>
 18. Schmutterer H, Ascher KRS, Rembold H. Natural Pesticides from the Neem Tree (*Azadirachta Indica* A. Juss): Proceedings of the First International Neem Conference, Rottach-Egern, Federal Republic of Germany. 1980,1981;297.
 19. Hannah R, Ramani P, Brundha MP, Sherlin HJ, Ranjith G, Ramasubramanian A, et al. Liquid Paraffin as a Rehydrant for Air Dried Buccal Smear. *Research Journal of Pharmacy and Technology*. 2019;12(3): 1197–200.
 20. Preethikaa S, Brundha MP. Awareness of diabetes mellitus among general population. *Research Journal of Pharmacy and Technology*. 2018;11(5):1825–9.
 21. Schmutterer H, Ascher KRS. Natural Pesticides from the Neem Tree (*Azadirachta Indica* A. Juss) and Other Tropical Plants: Proceedings of the Second International Neem Conference, Rauschholzhausen, Federal Republic of Germany. 1983;1984,587.
 22. Ramkumar S, Thulasiram HV, RaviKumar A. Improvement in serum amylase and glucose levels in diabetic rats on oral administration of bisdemethoxycurcumin

- from *Curcuma longa* and limonoids from *Azadirachta indica*. J Food Biochem. 2021 Feb 26;e13674.
23. Balachandran GB, David PW, Radhakrishnan V, Ali MNA, Baskaran VK, Virumandi D, et al. Investigation on the performance enhancement of single-slope solar still using green fibre insulation derived from *Artocarpus heterophyllus* rags reinforced with *Azadirachta indica* gum. Environ Sci Pollut Res Int; 2021. Available:<http://dx.doi.org/10.1007/s11356-021-13062-x>
 24. Lahiri D, Nag M, Dutta B, Mukherjee I, Ghosh S, Dey A, et al. Catechin as the Most Efficient Bioactive Compound from *Azadirachta indica* with Antibiofilm and Anti-quorum Sensing Activities Against Dental Biofilm: an In Vitro and In Silico Study. Appl Biochem Biotechnol; 2021. Available:<http://dx.doi.org/10.1007/s12010-021-03511-1>
 25. Facknath S. Neem, *Azadirachta indica* [Internet]. African Indigenous Medical Knowledge and Human Health. 2018. p. 131–42. Available from: <http://dx.doi.org/10.1201/b22167-6>
 26. Antimicrobial activity of *Azadirachta indica* (Neem) methanol leaf extract and fractions [Internet]. Journal of Chemical Biological and Physical Sciences. 2020;10. Available:<http://dx.doi.org/10.24214/jcbps.b.10.4.56069>
 27. Dhanya RS, Adarsh VJ, Jalaluddin M, Rajasekaran UB, Sudeep CB. Comparative Evaluation of Neem Mouthwash on Plaque and Gingivitis: A Double-blind Crossover Study. The Journal of Contemporary Dental Practice. 2017;18:567–71. Available:<http://dx.doi.org/10.5005/jp-journals-10024-2085>
 28. Hastuty A. Antibiofilm and antimicrobial activities of papaya (*Carica papaya* L.) and stevia (*Stevia rebaudiana* Bertoni) leaf extracts against three biofilm-forming bacteria [Internet]. Vol. 1, Journal of Microbial Systematics and Biotechnology. 2019;19–29. Available:<http://dx.doi.org/10.37604/jmsb.v1i1.18>
 29. Chibuzo UC. Antimicrobial Activity of *Azadirachta indica* (Neem) Leaf Extract on Some Bacteria [Internet], International Journal of Current Microbiology and Applied Sciences. 2019;8:431–7. Available:<http://dx.doi.org/10.20546/ijcmas.2019.807.053>
 30. Gullian-Klanian M, Gold-Bouchot G, Delgadillo-Díaz M, Aranda J, Sánchez-Solís MJ. Effect of the use of *Bacillus* spp. on the characteristics of dissolved fluorescent organic matter and the phytochemical quality of *Stevia rebaudiana* grown in a recirculating aquaponic system. Environ Sci Pollut Res Int [Internet]. 2021 Mar 10; Available:<http://dx.doi.org/10.1007/s11356-021-13148-6>
 31. Sharma A, Reyes J, Borgmeyer D, Ayala-Chavez C, Snow K, Arshad F, et al. Author Correction: The sugar substitute *Stevia* shortens the lifespan of *Aedes aegypti* potentially by N-linked protein glycosylation. Sci Rep. 2021 Mar 10;11(1):6022.
 32. Pirgozliev V, Kljak K, Whiting IM, Rose SP, Mansbridge SC, Enchev S, et al. Feeding dry stevia leaf (*Stevia rebaudiana*) or xylanase improves the hepatic antioxidative status of broiler chickens. Res Vet Sci. 2021;136:227–9.
 33. Ethnobotany of *Stevia* and *Stevia rebaudiana* [Internet]. *Stevia*. 2001;53–80. Available:<http://dx.doi.org/10.1201/9780203165942-11>
 34. Salvador-Reyes R, Sotelo-Herrera M, Paucar-Menacho L. Study of *Stevia* (*Stevia rebaudiana* Bertoni) as a natural sweetener and its use in benefit of the health [Internet]. *Scientia agropecuaria*. 2014;157–63. Available:<http://dx.doi.org/10.17268/sci.agropecu.2014.03.06>
 35. Fyodorov AV, Ardasheva OA, Zorin DA. Specificity of Heavy Metals Accumulation in *Stevia Rebaudiana*. Polythematic Online Scientific Journal of Kuban State Agrarian University; 2017. Available:<http://dx.doi.org/10.21515/1990-4665-134-043>
 36. Kumari A, Kumar V, Malhotra N. *Stevia rebaudiana* [Internet]. Himalayan Medicinal Plants. 2021;199–221. Available: <http://dx.doi.org/10.1016/b978-0-12-823151-7.00005-2>
 37. Betancur-ancona D, Segura-Campos M. *Stevia rebaudiana*: Chemical Composition, Uses and Health Promoting Aspects. Nova Science Pub Incorporated; 2014;169.
 38. Douglas Kinghorn A. *Stevia: The Genus Stevia*. CRC Press; 2001;224.

39. Brambilla E, Cagetti MG, Ionescu A, Campus G, Lingström P. An in vitro and in vivo comparison of the effect of *Stevia rebaudiana* extracts on different caries-related variables: a randomized controlled trial pilot study. *Caries Res.* 2014;48(1): 19–23.
40. Mohapatra S, Doraikannan SS, Indiran MA, Rathinavelu PK. Comparison of Antimicrobial Efficacy of Chlorhexidine Mouthwash, Lemongrass (*Cymbopogon*) Oil and Neem (*Azadirachta indica*) Oil Against Oral Microflora: An in Vitro Study [Internet]. Vol. 10, *Indian Journal of Public Health Research & Development.* 2019; 369.
Available: <http://dx.doi.org/10.5958/0976-5506.2019.02831.6>
41. Atas M, Eryugur N, Ucar E, Ozyigit Y, Turgut K. The Effects of different nitrogen doses on antioxidant and antimicrobial activity of *Stevia rebaudiana* Bert.) [Internet]. Vol. 64, *Cellular and Molecular Biology.* 2018;39.
Available:<http://dx.doi.org/10.14715/cmb/2018.64.2.8>
42. Coventry E, Allan EJ. Microbiological and Chemical Analysis of Neem (*Azadirachta indica*) Extracts: New Data on Antimicrobial Activity [Internet]. Vol. 29, *Phytoparasitica.* 2001;441–50.
Available:<http://dx.doi.org/10.1007/bf02981863>
43. Obuli Ganesh Kishore S, Priyadharshini R, Rajeshkumar S, Palati Sinduja NT. Inflammatory and Antimicrobial Activity of Silver Nanoparticles Synthesized Using Piper Longum, *J Res Med Dent Sci,* 2021;9(10):70-76
44. Barma MD, Kannan SD, Indiran MA, Rajeshkumar S, Kumar RP. Antibacterial Activity of Mouthwash Incorporated with Silica Nanoparticles against *S. aureus*, *S. mutans*, *E. faecalis*: An in-vitro Study. *Journal of Pharmaceutical Research International.* 2020;32(16):25-33.
Available:<https://doi.org/10.9734/jpri/2020/v32i1630646>
45. Remedio RN, Nunes PH, Anholetto LA, Camargo-Mathias MI. Morphological alterations in the synganglion and integument of *Rhipicephalus sanguineus* ticks exposed to aqueous extracts of neem leaves (*Azadirachta indica* A. JUSS) [Internet]. *Microscopy Research and Technique.* 2014;77:989–98.
Available:<http://dx.doi.org/10.1002/jemt.22427>
46. AG, Gupta A. Effectiveness of Curry-Leaf Mouthwash in Maintaining Salivary and Tongue pH as Compared to Chlorhexidine Mouthwash: A Randomised Controlled Trial, *Journal of Natural & Ayurvedic Medicine;* 2018;2.
Available:<http://dx.doi.org/10.23880/jonam-16000114>
47. Aparna, M., Gajendran, P. L., Arjunker, R., & Rajeshkumar, S. (2020). Preparation Of Mouthwash Using Lycopene - Chitosan Nanocomposite And Its Cytotoxic And Antimicrobial Properties - An In Vitro Study. *Plant Cell Biotechnology And Molecular Biology,* 21(27-28), 113-123.
Available:<https://www.lkpress.org/index.php/pcbmb/article/view/5330>
48. Anita R, Paramasivam A, Priyadharsini JV, Chitra S. The m6A readers YTHDF1 and YTHDF3 aberrations associated with metastasis and predict poor prognosis in breast cancer patients. *Am J Cancer Res.* 2020 Aug 1;10(8):2546–54.
49. Jayaseelan VP, Paramasivam A. Emerging role of NET inhibitors in cardiovascular diseases. *Hypertens Res.* 2020 Dec;43(12): 1459–61.
50. Sivakumar S, Smiline Girija AS, Vijayashree Priyadharsini J. Evaluation of the inhibitory effect of caffeic acid and gallic acid on tetR and tetM efflux pumps mediating tetracycline resistance in *Streptococcus* sp., using computational approach. *Journal of King Saud University - Science.* 2020 Jan 1;32(1):904–9.
51. Smiline Girija AS. Delineating the Immuno-Dominant Antigenic Vaccine Peptides Against *gacS*-Sensor Kinase in *Acinetobacter baumannii*: An in silico Investigational Approach. *Front Microbiol.* 2020 Sep 8;11:2078.
52. Iswarya Jaisankar A, Smiline Girija AS, Gunasekaran S, Vijayashree Priyadharsini J. Molecular characterisation of *csgA* gene among ESBL strains of *A. baumannii* and targeting with essential oil compounds from *Azadirachta indica*. *Journal of King Saud University - Science.* 2020 Dec 1;32(8):3380–7.
53. Girija ASS. Fox3+ CD25+ CD4+ T-regulatory cells may transform the nCoV's final destiny to CNS! *J Med Virol;* 2020.
Available:<http://dx.doi.org/10.1002/jmv.26482>

54. Jayaseelan VP, Ramesh A, Arumugam P. Breast cancer and DDT: putative interactions, associated gene alterations, and molecular pathways. *Environ Sci Pollut Res Int*. 2021 Jun;28(21):27162–73.
55. Arumugam P, George R, Jayaseelan VP. Aberrations of m6A regulators are associated with tumorigenesis and metastasis in head and neck squamous cell carcinoma. *Arch Oral Biol*. 2021 Feb;122:105030.
56. Kumar SP, Girija ASS, Priyadharsini JV. Targeting NM23-H1-mediated inhibition of tumour metastasis in viral hepatitis with bioactive compounds from *Ganoderma lucidum*: A computational study. *pharmaceutical-sciences*. 2020; 82(2). Available:<https://www.ijpsonline.com/article/s/targeting-nm23h1mediated-inhibition-of-tumour-metastasis-in-viral-hepatitis-with-bioactive-compounds-from-ganoderma-lucidum-a-comp-3883.html>
57. Girija SA, Priyadharsini JV, Paramasivam A. Prevalence of carbapenem-hydrolyzing OXA-type β -lactamases among *Acinetobacter baumannii* in patients with severe urinary tract infection. *Acta Microbiol Immunol Hung*. 2019 Dec 9;67(1):49–55.
58. Priyadharsini JV, Paramasivam A. RNA editors: key regulators of viral response in cancer patients. *Epigenomics*. 2021 Feb;13(3):165–7.
59. Mathivadani V, Smiline AS, Priyadharsini JV. Targeting Epstein-Barr virus nuclear antigen 1 (EBNA-1) with Murraya koengii bio-compounds: An in-silico approach. *Acta Virol*. 2020;64(1):93–9.
60. Girija As S, Priyadharsini J V, A P. Prevalence of Acb and non-Acb complex in elderly population with urinary tract infection (UTI). *Acta Clin Belg*. 2021 Apr;76(2):106–12.
61. Anchana SR, Girija SAS, Gunasekaran S, Priyadharsini VJ. Detection of csgA gene in carbapenem-resistant *Acinetobacter baumannii* strains and targeting with *Ocimum sanctum* biocompounds. *Iran J Basic Med Sci*. 2021 May;24(5):690–8.
62. Girija ASS, Shoba G, Priyadharsini JV. Accessing the T-Cell and B-Cell Immuno-Dominant Peptides from *A.baumannii* Biofilm Associated Protein (bap) as Vaccine Candidates: A Computational Approach. *Int J Pept Res Ther*. 2021 Mar 1;27(1):37–45.
63. Arvind P TR, Jain RK. Skeletally anchored forsus fatigue resistant device for correction of Class II malocclusions-A systematic review and meta-analysis. *Orthod Craniofac Res*. 2021 Feb;24(1):52–61.
64. Venugopal A, Vaid N, Bowman SJ. Outstanding, yet redundant? After all, you may be another *Choluteca* Bridge! *Semin Orthod*. 2021 Mar 1;27(1):53–6.
65. Ramadurai N, Gurunathan D, Samuel AV, Subramanian E, Rodrigues SJL. Effectiveness of 2% Articaine as an anesthetic agent in children: randomized controlled trial. *Clin Oral Investig*. 2019 Sep;23(9):3543–50.

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