JOURNAL OF HEALTHCARE SCIENCES Volume 4 Issue 12 2024, Article ID: JOHS2024000969 http://dx.doi.org/10.52533/JOHS.2024.41220 e-ISSN: 1658-8967



# JOURNAL OF HEALTHCARE SCIENCES

# A Dietary Approach to Reducing Halitosis The Impact of Certain Foods on Oral Bacteria

Mahdi Mordi Alanazi<sup>1\*</sup>, Yasmeen Baqer Alhajji<sup>2</sup>, Muqbil Jazaa Almutairi<sup>3</sup>, Shahad Benaidr Alharbi<sup>1</sup>, Tahani Hasan Aljawad<sup>4</sup>, Amani Hassan Aljawad<sup>5</sup>

<sup>1</sup> Dental Department, Qassim Health Cluster, Qassim, Saudi Arabia

<sup>2</sup> Dental Department, Al Ahsa Health Cluster, Al Ahsa, Saudi Arabia

<sup>3</sup> Dental Department, King Saud Hospital, Unaizah, Saudi Arabia

<sup>4</sup> General Dental Clinic, First Health Cluster, Qatif, Saudi Arabia

<sup>5</sup> Dental Department, Qatif Health Network, Qatif, Saudi Arabia

Correspondence should be addressed to **Mahdi Mordi Alanazi**, Dental Department, Qassim Health Cluster, Qassim, Saudi Arabia. Email: dr.mahdealanazi@gmail.com

Copyright © 2024 **Mahdi Mordi Alanazi**, this is an open-access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Received: 08 December 2024, Reviewed: 22 December 2024, Accepted: 23 December 2024, Published: 24 December 2024.

#### Abstract

Halitosis, commonly known as bad breath, is a condition primarily caused by volatile sulfur compounds (VSCs) produced by anaerobic bacteria in the oral cavity. Beyond oral hygiene and systemic health issues, dietary habits play a pivotal role in the modulation of oral microbiota and the management of halitosis. Certain foods exacerbate the condition by fueling bacterial fermentation and enhancing VSC production, while others have antimicrobial properties or stimulate salivary flow to mitigate malodor. High-sugar diets have been shown to increase the prevalence of odor-causing bacteria by providing substrates for fermentation. These diets contribute to an acidic oral environment, promoting the growth of anaerobic species responsible for VSC production. In contrast, probiotic-rich foods, such as yogurt and fermented products, introduce beneficial bacteria that inhibit pathogenic strains, thereby reducing malodor. Specific strains, like Streptococcus salivarius K12, have demonstrated significant efficacy in clinical settings. Natural foods and beverages, including green tea, parsley, and clove, possess antimicrobial compounds that target bacteria implicated in halitosis. Their bioactive components, such as polyphenols and essential oils, disrupt bacterial activity and reduce VSC levels. Additionally, water-rich foods like fruits and vegetables enhance hydration and stimulate saliva production, aiding in the mechanical and enzymatic cleansing of the oral cavity. Chronic dehydration, often associated with xerostomia, exacerbates halitosis, highlighting the importance of maintaining adequate hydration. Dietary strategies offer an accessible and non-invasive approach to managing halitosis while simultaneously improving oral health. The integration of these foods into daily routines addresses not only the microbial causes of halitosis but also systemic factors contributing to oral malodor. Understanding these relationships between diet and oral health underscores the potential of dietary interventions in promoting long-term oral and systemic well-being.

Keywords: volatile sulfur compounds, halitosis, oral hygiene, dietary habits, diet

# Introduction

Halitosis, commonly known as bad breath, is a widespread condition that significantly affects social interactions and quality of life. It is primarily caused by volatile sulfur compounds (VSCs) such as hydrogen sulfide and methyl mercaptan, produced by anaerobic bacteria residing in the oral cavity. These bacteria, found predominantly on the tongue's dorsum, periodontal pockets, and tonsillar crypts, metabolize proteins and amino acids from food debris, saliva, and gingival crevicular fluid, leading to the release of odorous compounds (1). Beyond oral hygiene and systemic health conditions, diet plays a pivotal role in influencing the composition and activity of oral bacteria, making it a crucial factor in the development and management of halitosis (2).

The relationship between diet and halitosis has been a subject of interest in oral health research. Certain foods can exacerbate bad breath by directly contributing to the production of malodorous compounds or by altering the oral microbial ecosystem. For example, high-protein diets provide substrates such as sulfur-containing amino acids that facilitate VSC production. Similarly, sugary and carbohydrate-rich foods promote bacterial growth, leading to the fermentation processes that result in unpleasant odors (3). Conversely, some foods have been found to combat halitosis by either mechanically cleaning the oral cavity, stimulating salivary flow, or introducing beneficial bacteria that suppress pathogenic strains (4).

Saliva plays a critical role in oral health by acting as a natural cleanser and maintaining microbial balance. Dietary components that promote salivary flow, such as water-rich fruits and vegetables, contribute to the removal of food particles and bacteria from the oral cavity. Additionally, natural antimicrobial agents present in certain foods, including green tea, parsley, and yogurt, have been reported to reduce bacterial load and neutralize VSCs. These dietary choices not only help in managing halitosis but also offer benefits for overall oral health (3). Probiotic-rich foods have also emerged as a potential solution for halitosis management. Probiotics introduce beneficial microorganisms that compete with and inhibit the growth of odor-producing bacteria. Clinical studies have demonstrated the efficacy of probiotics in reducing halitosis by restoring microbial balance in the oral cavity. This suggests that dietary modifications incorporating probiotics and other beneficial foods could serve as a non-invasive and accessible approach to managing bad breath (2).

The influence of diet on halitosis extends beyond its direct effects on oral bacteria. Systemic factors such as gut health, hydration, and metabolic processes are also impacted by dietary habits and contribute indirectly to oral malodor. For example. dehydration reduces saliva production, creating a favorable environment for anaerobic bacteria to thrive. Additionally, poor dietary habits that lead to inflammation systemic or gastrointestinal disturbances can exacerbate halitosis, highlighting the interconnected nature of diet, systemic health, and oral health (4). Understanding the role of diet in halitosis sheds light on the broader implications of nutrition for oral and systemic health. This interconnected relationship underscores the importance of dietary choices in not only managing halitosis but also promoting long-term oral health and overall well-being.

# Review

Diet plays a significant role in the management of halitosis through its influence on oral bacteria and the production of VSCs. Certain foods have been shown to exacerbate halitosis by providing substrates for bacterial metabolism, while others act as natural antimicrobials or promote oral health by stimulating salivary flow. High-protein diets, for instance, can increase VSC production as they contain sulfur-rich amino acids metabolized by anaerobic bacteria. Similarly, sugary foods fuel bacterial fermentation, promoting the proliferation of odor-causing microorganisms (5). These dietary choices emphasize the need for a balanced diet to mitigate factors contributing to halitosis.

On the other hand, foods rich in probiotics, such as yogurt and fermented products, have shown promise in reducing halitosis. Probiotics introduce beneficial bacteria that compete with pathogenic strains, helping to suppress the production of VSCs. Furthermore, green tea and parsley, known for their antimicrobial properties, can help reduce oral bacterial loads, providing a natural and effective way to manage bad breath (6). These findings highlight the potential of dietary interventions as complementary strategies in the treatment of halitosis, offering a holistic approach that aligns with overall oral and systemic health.

# Role of Probiotic Foods in Modulating Oral Microbiota

Probiotic foods have gained considerable attention for their potential to influence oral health by modulating the microbial ecosystem within the oral cavity. The balance of the oral microbiota is a critical factor in preventing halitosis, as an overgrowth of anaerobic bacteria leads to the production of VSCs, which are primarily responsible for bad breath. Probiotic foods, such as yogurt, kefir, and fermented vegetables, contain beneficial microorganisms like Lactobacillus and Bifidobacterium species, which can inhibit the VSC-producing growth of bacteria through competitive exclusion and secretion of antimicrobial compounds (7).

The mechanisms by which probiotics exert their effects are multifaceted. Beneficial bacteria introduced through diet can adhere to oral tissues, reducing the space and nutrients available for pathogenic strains. This microbial competition limits the activity of harmful bacteria that contribute to halitosis. Furthermore, probiotics can produce bacteriocins, which are proteins capable of directly inhibiting the growth of malodor-causing microbes Porphyromonas such gingivalis as and Fusobacterium nucleatum (8). These effects have been supported by in vivo studies showing reductions in halitosis symptoms following regular consumption of probiotic-containing foods. A particularly notable strain in this context is Streptococcus salivarius K12, which has been demonstrated to reduce VSC levels and improve overall breath quality. This strain works by colonizing the tongue and suppressing the metabolic activity of odor-producing bacteria. Clinical trials

indicate that daily supplementation with *S. salivarius* K12 reduces both the bacterial load associated with halitosis and the subjective perception of bad breath, making it an effective tool for maintaining oral health (9). These findings suggest that probiotic-rich foods can play a direct role in controlling oral malodor.

Probiotics can modulate the oral immune response, enhancing the host's ability to control pathogenic bacterial activity. For instance, probiotics may production stimulate the of secretory immunoglobulin A (sIgA), an antibody that binds to bacterial surfaces and prevents adhesion to oral tissues. This immunological response further reduces the ability of VSC-producing bacteria to thrive in the oral environment (10). Such interactions between dietary probiotics and host immunity underscore the complex relationship between diet and oral health. Despite these promising findings, the efficacy of probiotics in managing halitosis can vary based on the strain of bacteria, dosage, and frequency of consumption. The incorporation of probiotics into daily dietary habits, either through natural sources or supplementation, has shown potential as a practical and accessible method to address halitosis. However, more longitudinal studies are necessary to establish standardized recommendations for their use in clinical settings.

# Impact of High-Sugar Diets on Volatile Sulfur Compound Production

Dietary sugar has a profound impact on oral microbiota, directly influencing the production of VSCs, the primary contributors to halitosis. Highsugar diets provide an abundant source of fermentable carbohydrates that promote the growth of acidogenic and VSC-producing bacteria in the oral cavity. When sugars are metabolized by these bacteria, the resulting fermentation processes byproducts that create generate acidic an environment conducive to the proliferation of anaerobic species, such as Prevotella intermedia Fusobacterium nucleatum and (11). These anaerobes thrive in acidic, oxygen-deprived conditions, enhancing their ability to metabolize

sulfur-containing amino acids and release malodorous compounds.

The excessive consumption of sugary foods and beverages exacerbates this process by increasing plaque accumulation on the teeth and tongue. Plaque biofilms harbor diverse microbial populations, VSC producers, which feed including on proteinaceous debris trapped within the biofilm matrix. As sugar intake rises, the microbial composition of the biofilm shifts, favoring bacteria sulfur-containing of metabolizing capable substrates into hydrogen sulfide and methyl mercaptan, two of the most odorous VSCs (12). Research has demonstrated that individuals with diets high in refined carbohydrates exhibit elevated VSC levels in their oral cavity, correlating with increased reports of halitosis.

Interestingly, the frequency of sugar intake appears to play a more significant role in halitosis than the absolute quantity consumed. Frequent snacking on sugary foods prevents oral pH levels from returning to baseline, sustaining an acidic environment that favors VSC production. The low pH not only fosters the growth of anaerobic bacteria but also reduces salivary buffering capacity, further compromising the oral cavity's natural defenses. Saliva, which serves as a critical mechanism for neutralizing acids and flushing out debris, becomes less effective in clearing sulfurous byproducts when sugar intake is excessive (13).

Certain high-sugar products, particularly carbonated beverages, pose an additional risk. The combination of sugar and acidic pH in these drinks amplifies their ability to disrupt oral microbiota and stimulate VSC production. Moreover, carbonated beverages often contain phosphoric or citric acid, which erodes enamel and exposes dentin, providing an even greater surface area for bacterial colonization. Studies have shown that regular consumption of sugary, acidic beverages is strongly associated with increased prevalence of halitosis, highlighting the compounding effects of sugar and acid on oral malodor (14).

The impact of high-sugar diets on VSC production also extends beyond the oral cavity. Systemic

changes in glucose metabolism can indirectly influence oral health by altering salivary composition. For example, elevated blood sugar levels, as seen in individuals with poorly controlled diabetes, lead to glycation of salivary proteins, making them more susceptible to bacterial degradation and subsequent VSC release. These systemic interactions underscore the interconnectedness of diet, systemic health, and oral microbiota, demonstrating how dietary sugars can contribute to halitosis through multiple pathways.

# Antimicrobial Properties of Natural Foods and Beverages

Natural foods and beverages with antimicrobial properties have shown significant potential in managing halitosis by reducing the load of VSCproducing bacteria in the oral cavity. Many plantbased foods and beverages contain bioactive compounds such as polyphenols, flavonoids, and essential oils, which exhibit inhibitory effects on bacterial growth and metabolism. Green tea, for instance, is rich in catechins, particularly epigallocatechin gallate, which has been found to target key bacterial species involved in VSC production, such as Fusobacterium nucleatum and Porphyromonas gingivalis (15). By interfering with bacterial enzymatic activity, green tea catechins reduce the formation of malodorous sulfur compounds while simultaneously promoting oral health. Other beverages like cranberry juice have also garnered attention for their antimicrobial effects. Cranberries contain proanthocyanidins, which disrupt bacterial adhesion to oral surfaces, including the tongue and teeth. This interference with biofilm formation limits the ability of anaerobic bacteria to colonize the oral cavity and metabolize proteins into VSCs (16). Studies have reported reductions in bacterial counts and VSC levels in individuals consuming cranberry-based products, suggesting their utility as a dietary intervention for halitosis.

Among natural foods, raw vegetables and certain herbs exhibit pronounced antimicrobial activities. For example, parsley and mint contain essential oils with antibacterial properties that can neutralize odor-causing bacteria. The chlorophyll content in

parsley has been specifically noted for its ability to deodorize malodorous compounds through chemical neutralization rather than microbial inhibition alone. Additionally, mint's menthol content contributes to a refreshing sensation while simultaneously targeting microbial growth, making it a popular ingredient in oral care products and dietary regimens (17).

Spices such as clove and cinnamon further enhance the antimicrobial repertoire of natural foods. Clove, known for its high concentration of eugenol, has demonstrated potent bactericidal effects against halitosis-associated anaerobes. Cinnamon, on the other hand, contains cinnamaldehyde, which disrupts bacterial cell membranes, reducing their viability and capacity to produce odor-causing byproducts. These spices, when incorporated into meals or consumed in teas, provide a flavorful yet functional approach to reducing oral malodor (18). The antimicrobial efficacy of these natural foods and beverages is not limited to their direct effects on oral bacteria. Many of these substances also influence the overall microbial ecology of the oral cavity by fostering beneficial bacterial populations. Polyphenols in green tea and cranberries, for example, selectively inhibit pathogenic strains while allowing commensal species to thrive, promoting a balanced microbiota. This dual action not only helps manage halitosis but also contributes to broader oral health benefits, such as reduced risk of periodontal disease and dental caries.

# *Hydration and the Role of Water-Rich Foods in Salivary Stimulation*

Hydration plays a fundamental role in oral health, particularly in the regulation of salivary flow, which is critical for controlling halitosis. Saliva acts as a natural cleanser, removing food debris and bacteria from the oral cavity while neutralizing acidic byproducts and buffering against microbial activity. Dehydration reduces salivary output, creating an environment conducive to the growth of anaerobic bacteria that produce VSCs associated with halitosis. Consuming water-rich foods, such as fruits and vegetables, can significantly enhance hydration and promote salivary stimulation, reducing the risk of malodor (19). Fruits like watermelon, oranges, and cucumbers are not only hydrating due to their high water content but also stimulate salivary glands mechanically during chewing. This increase in saliva production aids in flushing out bacteria and reducing the concentration of VSCs. Additionally, the natural fiber content in these foods acts as a mild abrasive, further aiding in the removal of bacterial biofilms from oral surfaces (20). Studies have demonstrated that individuals incorporating water-rich fruits and vegetables into their diets exhibit improved oral hygiene and reduced halitosis, underscoring the dual benefits of hydration and mechanical cleansing.

Apart from fresh produce, herbal teas can contribute to hydration while offering additional oral health benefits. Chamomile and peppermint teas, for instance, not only replenish fluid levels but also contain bioactive compounds with antimicrobial properties. These teas help stimulate saliva production and combat odor-causing bacteria simultaneously. The warmth of herbal teas further enhances salivary flow by increasing blood circulation to the salivary glands, making them a valuable addition to dietary strategies for managing halitosis (21). The role of hydration extends beyond direct salivary stimulation. Maintaining adequate fluid intake throughout the day helps dilute the oral environment, reducing the concentration of malodorous compounds and their precursors. Chronic dehydration has been linked to xerostomia, or dry mouth, a condition characterized by insufficient saliva production and an increased prevalence of halitosis. Drinking water consistently can mitigate these effects, creating an unfavorable environment for the growth of VSC-producing bacteria (22). Interestingly, the choice of beverages can also influence hydration and oral health outcomes. While water is the most effective means of maintaining hydration, sugar-free options such as infused water with lemon or cucumber provide additional flavor and encourage fluid intake without contributing to bacterial fermentation. These beverages not only help in salivary stimulation but also introduce mild acidity or antioxidants, which can counteract the activity of odor-causing microbes. In contrast, caffeinated or sugary

beverages should be minimized, as they can dehydrate the oral cavity and provide a substrate for bacterial growth, exacerbating halitosis. The combination of hydration from water-rich foods and the mechanical action of chewing underscores the multifaceted benefits of these dietary choices. Encouraging the inclusion of such foods in daily diets not only addresses halitosis but also contributes to broader oral health improvements, including reduced plaque accumulation and a balanced oral microbiota.

## Conclusion

Dietary choices play a significant role in managing halitosis by influencing oral bacteria, salivary flow, and the production of volatile sulfur compounds. Incorporating probiotic foods, limiting high-sugar diets, consuming natural antimicrobials, and staying hydrated with water-rich foods can effectively mitigate bad breath. These strategies not only address halitosis but also contribute to overall oral and systemic health. Further research is warranted to refine dietary recommendations and integrate them into comprehensive oral care practices.

#### Disclosure

#### **Conflict of interest**

There is no conflict of interest

#### Funding

No funding

#### Ethical consideration

Non applicable

#### Data availability

Data that support the findings of this study are embedded within the manuscript.

#### Author contribution

All authors contributed to conceptualizing, data drafting, collection and final writing of the manuscript.

#### References

1. Rosenberg M. The science of bad breath. Scientific American. 2002;286(4):72-9.

2. de Godoi Machado NA, Strini PJSA, Carneiro MOP, Júnior RB, Neto AJF. Halitosis: a review of basic principles. Brazilian journal of oral sciences. 2008;7(26):1627-30.

3. Burton J, Chilcott C, Moore C, Speiser G, Tagg J. A preliminary study of the effect of probiotic Streptococcus salivarius K12 on oral malodour parameters. Journal of applied microbiology. 2006;100(4):754-64.

4. Jo Y, Carter B, Barbano D, Drake M. Identification of the source of volatile sulfur compounds produced in milk during thermal processing. Journal of Dairy Science. 2019;102(10):8658-69.

5. Morita M, Wang HL. Association between oral malodor and adult periodontitis: a review. Journal of clinical periodontology. 2001;28(9):813-9.

6. Kang M-S, Oh J-S, Kang I-C, Hong S-J, Choi C-H. Inhibitory effect of methyl gallate and gallic acid on oral bacteria. The Journal of Microbiology. 2008;46:744-50.

7. Meurman JH, Stamatova I. Probiotics: contributions to oral health. Oral diseases. 2007;13(5):443-51.

8. Allaker RP, Stephen AS. Use of probiotics and oral health. Current oral health reports. 2017;4:309-18.

9. Zupancic K, Kriksic V, Kovacevic I, Kovacevic D. Influence of oral probiotic Streptococcus salivarius K12 on ear and oral cavity health in humans: systematic review. Probiotics and antimicrobial proteins. 2017;9:102-10.

10. Ishikawa KH, Mayer MP, Miyazima TY, Matsubara VH, Silva EG, Paula CR, et al. A multispecies probiotic reduces oral Candida colonization in denture wearers. Journal of Prosthodontics. 2015;24(3):194-9.

11. Washio J, Sato T, Koseki T, Takahashi N. Hydrogen sulfide-producing bacteria in tongue biofilm and their relationship with oral malodour. Journal of medical microbiology. 2005;54(9):889-95.

12. Takahashi N, Nyvad B. The role of bacteria in the caries process: ecological perspectives. Journal of dental research. 2011;90(3):294-303.

13. Lingstróm P, Van Houte J, Kashket S. Food starches and dental caries. Critical Reviews in Oral Biology & Medicine. 2000;11(3):366-80.

14. Fejerskov O, Nyvad B, Kidd EA. Pathology of dental caries. Dental caries: the disease and its clinical management. 2: Blackwell Munksgaard Oxford, UK; 2008. p. 20-48.

15. Lodhia P, Yaegaki K, Khakbaznejad A, Imai T, Sato T, Tanaka T, et al. Effect of green tea on volatile sulfur compounds in mouth air. Journal of nutritional science and vitaminology. 2008;54(1):89-94.

16. Yamanaka A, Kimizuka R, Kato T, Okuda K. Inhibitory effects of cranberry juice on attachment of oral streptococci and biofilm formation. Oral microbiology and immunology. 2004;19(3):150-4.

17. Nissen L, Zatta A, Stefanini I, Grandi S, Sgorbati B, Biavati B, et al. Characterization and antimicrobial activity of essential oils of industrial hemp varieties (Cannabis sativa L.). Fitoterapia. 2010;81(5):413-9.

18. Moon S-E, Kim H-Y, Cha J-D. Synergistic effect between clove oil and its major compounds and antibiotics against oral bacteria. Archives of oral biology. 2011;56(9):907-16.

19. Dodds MW, Johnson DA, Yeh C-K. Health benefits of saliva: a review. Journal of dentistry. 2005;33(3):223-33.

20. Sheiham A. Dietary effects on dental diseases. Public health nutrition. 2001;4(2b):569-91.

21. Gulati OP, Ottaway PB. Legislation relating to nutraceuticals in the European Union with a particular focus on botanical-sourced products. Toxicology. 2006;221(1):75-87.

22. Ship JA, Pillemer SR, Baum BJ. Xerostomia and the geriatric patient. Journal of the American Geriatrics Society. 2002;50(3):535-43.