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Oral Health of Renal Transplant Patients in Hong Kong. C.S.P.TSANG*, C.S.F. CHU, T.M. CHAN, WK LEUNG, A.W.K. CHAN, L.P. SAMARANAYAKE (University of Hong Kong, HKSAR). 471

FK506 is a relatively new immunosuppressive drug which has recently been introduced to renal transplant patients in Hong Kong. Hence our aim was to compare the effect of cyclosporin A (CsA) and FK506 on gingival overgrowth and the oral carriage of yeasts and coliforms in these patients. The effect of non-surgical periodontal treatment on gingival overgrowth was also investigated. A total of 47 patients receiving CsA (mean age 43.1 years) and 10 receiving FK506 (40.1 years) were recruited from the Renal Unit of the Queen Mary Hospital, Hong Kong. Stone casts were taken for measurement of gingival overgrowth (Seymour et al., *J Clin Periodontol* 1985;12:413-9) and the concentrated oral rinse culture (Samaranayake et al., *J Oral Pathol Med* 1986;15:251-4) was used to investigate oral carriage rate of yeasts and coliforms. The patients were reviewed one year later, after a periodontal treatment programme. Significant difference in gingival overgrowth was found between the CsA and the FK506 group (45.2% vs 25.1%, $P < 0.05$) at the initial visit. The most common yeast and coliform isolated were *Candida albicans* and *Klebsiella pneumoniae*, respectively. No significant difference was found in the carriage rate of yeasts and coliforms between the CsA and FK506 groups (34.0% and 40% for yeasts; 42.5% and 20% for coliforms, respectively; $P > 0.05$). Gingival overgrowth and oral carriage rates of yeasts and coliforms were not related to the serum concentration of CsA and FK506 in the study. However, the difference between the pre- and post-treatment gingival overgrowth indices was significant for both groups ($P < 0.0001$). Therefore, FK506 appeared to ameliorate gingival overgrowth as compared with CsA and non-surgical periodontal treatment was effective in reducing gingival overgrowth in both CsA and FK506 patients. 746

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