Saliva is essential for the preservation of oral health. Saliva has many physiological functions, such as food digestion, antimicrobial actions, remineralization of teeth, buffering of pH. Salivary dysfunction results in impaired food and beverage intake, host defense, and communication, all of which ultimately have an adverse influence on a person’s quality of life. Sjögren’s syndrome (SS), the use of drugs with anticholinergic effects and radiotherapy for head and neck cancers are the most common causes of dry mouth. However, pathophysiological feature of dry mouth has been unclear yet. We believe, therefore, that establishment of dry mouth-model animals is important.

NOD mice and E2F1-deficient mice have been used as a dry mouth-model (1). E2F1-deficient NOD mice develop SS more progressively than NOD mice do (1). However, such dry mouth-model mice are associated with underlying disease such as diabetes. Recently, Matsui-Inohara, et al. (2) have established E2F1-deficient non-obese diabetic/severe combined immunodeficiency disease (NOD/SCID) mice. In E2F1-deficient NOD/SCID mice, the number of ducts in the salivary gland was increased compared with control mice, suggesting destruction of acinar cells. Normally, simultaneous stimulation with isoproterenol and pilocarpine provokes small volume of salivary secretion in mice. Moreover, these mice are not associated with underlying disease except SCID. Therefore,
E2F-1-deficient NOD/SCID mice have been considered useful for study of treatment of dry mouth. Polyposia is a clinical sign of dry mouth in human. Treatment of polyposia is a main care for dry mouth patients. Analyzing polyposia in experimental animal has been difficult because of lack of such animal models. However, Nakamura, et al. (3) reported that muscarinic acetylcholine receptor-knockout mice showed behavior similar to polyposia when analyzed by a novel method. Under non-invasive condition, these authors measured the frequency of water intake preceded by eating using video movie, indicating that this method is useful. We, therefore, investigated the behavior of polyposia in E2F-1-deficient NOD/SCID mice using Nakamura’s methods (3).

First, we examined effects of pilocarpine on saliva secretion in E2F-1-deficient NOD/SCID mice. The volume of saliva secreted was measured by the paper plug method. E2F-1-deficient NOD/SCID mice secreted saliva upon stimulation with pilocarpine (0.05 mg/100 g body weight) in a time-dependent manner; the volume of saliva secreted was about one third of that by control mice. This result was similar to the previous report (2), suggesting that E2F-1-deficient NOD/SCID mice secret less amount of saliva with a cholinergic stimulation. Next, we analyzed the behavior of polyposia according to Nakamura’s method (3). We recorded video movie of prandial water drinking in E2F-1-deficient NOD/SCID mice which had been fasted overnight. The frequency and time of water intake in E2F-1-deficient NOD/SCID mice were almost double compared with control mice, suggesting that E2F-1-deficient NOD/SCID mice have behavior of polyposia.

In conclusion, E2F1-deficient NOD/SCID mice are very useful experimental model for the treatment study of dry mouth patients. The analysis of video movie taken during prandial water drinking in mice is extremely useful for study of pathophysiological feature of dry mouth.

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REFERENCES