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Abstract

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Directed by Prof. Chan-Young Lee, D.D.S. Ph.D.

Recent molecular approaches have revealed that fastidious organisms such as *Bacteroides forsythus* and oral treponemes are frequently found in the root canals with apical periodontitis. The purpose of this study was to identify the isolates of oral spirochetes at the species-level in endodontic infections and determine their association with *Bacteroides forsythus* and *Porphyromonas gingivalis*. Seventy-nine teeth with apical periodontitis were selected for this study. After sampling from the root canals aseptically, PCR amplification for the 16S rRNA gene was performed with eubacterial universal primers. Subsequently, dot-blot hybridization was performed with 8 species-specific oligonucleotide probes.

The microbial associations were analyzed using the odds ratio.

The most frequently found species was *P. gingivalis* (27.4%), followed by *Treponema maltophilum* (26%), *B. forsythus* (16.4%) and *Treponema socranskii* (2.7%). The other treponemes including *Treponema denticola* were not detected in our samples.

Significant microbial associations were identified between T. maltophilum, B. forsythus and P. gingivalis by utilizing analysis with the odds ratio. The results indicate that T. maltophilum should be included in the etiologic studies of endodontic diseases.

Keywords: Spirochetes, Endodontic infection, Dot-blot hybridization, PCR

Identification of oral spirochetes at the species-level and their association with other bacteria in endodontic infections

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I. Introduction

Apical periodontitis is attributed to a larger complex of bacteria (1,2). However, many investigators (2-4) have suggested that some species may have a key function in the development of the disease. In accordance with this, recent molecular genetic analyses on the root canal flora (5-7) have revealed some notable findings: both *Bacteroides forsythus* and oral treponemes, which were considered to be important pathogens in periodontal diseases (8,9), were frequently found in the infected root canals. These findings have not been observed by previous culture-based investigations (1-4, 10,11). Since frequent detection of these bacteria from the infected root canals implies that the anaerobes also play important roles in endodontic diseases in addition to periodontal diseases, it is necessary to investigate the etiologic roles of these bacteria in the root canal infections.

The first step in assessing the role of treponemes in endodontic

infections is to investigate the extent to which these bacteria are established in the root canals at the species-level. Some investigators (12-14) have observed various spirochetal morphotypes in the root canals with dark-field or electron microscopy, and Dahle et al. (15) performed a biochemical identification to characterize the isolates of spirochetes. However, these methods have some limitations in classifying the variants of oral spirochetes. To date, few studies have attempted to identify the endodontic isolates of spirochetes at the species-level. Recent 16S rRNA-based analyses have revealed an unexpected diversity of oral treponemes in the subgingival pocket (16, 17). Among these, 8 species have been identified and named (17): Treponema denticola (18), Treponema vincentii (19), Treponema socranskii (20), Treponema pectinovorum (21), Treponema maltophilum (22), Treponema medium (23), Treponema amyloborum (24) and Treponema lecithinolyticum (25). Since the 16S rRNA approach is thought to be one of the most useful tools in discriminating oral spirochetes, this method is appropriate in investigating the endodontic isolates.

Many investigators (8, 26, 27) have suggested that certain microbial complexes are more important in regulating the severity of infection than the presence of individual species. In the view of these associations, B. forsythus and Porphyromonas gingivalis have been noted in periodontal infections. Along with T. denticola, they are intimately related to each other, and the presence of their complexes is strongly correlated with the severity of periodontal disease (8). We could not find any complex associated with the symptomatic teeth in the previous study (7). However, we found that some species appear frequently as complexes in

the root canals as well as in the subgingival plaque.

The root canal flora is useful in investigating the microbial association because contamination is minimized and no normal flora is found. Previous studies (6, 8, 26, 27) on the microbial associations have mainly been focused on *T. denticola* among oral spirochetes. Considering the diversity of spirochetes in the subgingival pocket, it is necessary to reassess the microbial association by the species-specific probes.

The purpose of this study was (a) to identify the isolates of oral treponemes from the root canals at the species-level; and (b) to determine the association among the selected bacteria in the root canal flora. This work was performed by polymerase chain reaction (PCR) and dot-blot hybridization using oligonucleotides probes based on the 16S rRNA.

II. MATERIALS AND METHODS

Clinical samples. Seventy-nine patients treated at the Dental Hospital of Yonsei University were selected for this study. Their ages ranged from 11 to 71 years (mean 39). The selected teeth had single roots containing necrotic pulps and radiographic evidence of periapical bone resorption. None of these teeth had been administered either antibiotic medication within the preceding 3 months, nor periodontal pocket extended to the apical third of the tooth.

The sampling procedures outlined in a previous study (7) were used. Briefly, the teeth and rubber dam were disinfected with NaOCl and an access opening was made aseptically. If upon opening, a sterile paper point was then introduced and retained for 20 sec. Where a dry canal was identified, sterile water was introduced into the canal and mixed with the contents of the root canal using a file. A total of 3 paper points were obtained from each tooth. The paper points were immediately placed in 1 M2 of reduced transfer fluid and transferred to the laboratory.

Bacterial strains. Thirty-nine oral bacterial strains were chosen to evaluate the specificity of the oligonucleotides probes used in this study. The microorganisms included 25 strains from the American Type Culture Collection (ATCC, Rockville, MD) and 14 clinical isolates (Table 1).

Table 1. Oral bacterial strains employed in this study

Bacteria	ATCC No.	clinical isolate
Treponema denticola	33521	
Treponema pectinovorum	33768	
Treponema maltophilum	51939	
Treponema lecithinolyticum	700332	
Treponema vincentii	35580	
Treponema socranskii subsp. socranskii	35536	
Treponema socranskii subsp. buccale	35534	
Treponema amylovorum		700288
Treponema phagedenis		biotype Reiter
Bacteroides forsythus	43037	057/35-6
Porp hy rom on as gingivalis	33272	057/35-1
	33277	A7A1-28,
	53978	
Actinobacillus actinomycetemcomitans	29522	D56
·	33384	
Fusobacterium nucleatum	49256	058/ 16-3a
	25586	058/16-3b
		058/16-3c
Peptostreptococcus micros	33270	057/35-5
Peptosteptococcus prevotii	14951	
Porphyromonas endodontalis	35406	
Prevotella intermedia	25611	
	49046	
Prevotella nigrescens	33536	D-96/3
		NCTC 9336
Actinomyces israelii		057/35-10
Actinomyces naeslundii	12104	
Campylobacter concisus		
057/34-4b		
Capnocytophaga gingivalis		060/ 16-2b
Lact ob acillus casei	27216	
Streptococcus mutans	25175	

DNA extraction and amplication. Aliquots of each sample (500 μ e) were centrifuged (Jouan, Saint-Herblain, France) at 13,000 xg for 10 min. The resulting pellets were washed with 500 $\mu\ell$ of phosphate buffered saline, and placed in 100 $\mu\ell$ of lysis buffer (500mM Tris-HCl (pH 9.0), 20 mM EDTA, 10mM NaCl, 1% SDS). DNA extraction was performed with phenol (2 vol.): phenol (1 vol)/chloroform (1 vol): chloroform (2 vol.). One microliter of bulk DNA was used for PCR in a thermal cycler for 30 cycles of denaturation (1 min, 95), annealing (1min, 55), and extension (1min, 72). The broad-range eubacterial primers used for 16S rRNA gene amplification were TPU1 (5'AGA GTT TGA TCM TGG CTC AG-3: corresponding to positions 8 to 27 in E.coli 16S rRNA) and RTU3 (5-GWA TTA CCG CGG CKG CTG-3, which corresponded to positions 519 to 536 in E. coli 16S rRNA). PCR of the reference bacterial strains was performed with cell pellets collected from the cultures, and the PCR products of approximately 500 bp were confirmed by agarose gel electrophoresis.

Oligonucleotide probes. The oligonucleotide probes for hybridization were selected from the publication (28) or made from the sequences in the EMBL and GeneBank databases. Six species-specific probes were used to characterize the isolates of oral treponemes. Probes TDEN, TVIN, TSOC, TPEC, TMAL, and TLEC were synthesized to detect the known cultivable treponemes *T. denticola, T. vincentii, T. socranskii, T. pectinovorum, T. maltophilum* and *T. lecithinolyticum*, respectively. In addition, probes PGIN and BFOS were prepared to detect *P. gingivalis* and *B. forsythus*, respectively. The specificity of each probe was confirmed with the reference bacterial strains. The sequences of each

probe are presented in Table 2. The probes were labeled with digoxigenin (DIG)-ddUTP using a DIG oligonucleotide 3-end labeling kit (Boehringer Mannheim, Germany) according to the manufacturers instructions.

Table 2. Sequences of the selected oligonucleotides

Probes	Sequence (5'-3') of probes	
TDEN	CATGACTACCGTCATCAAAGAAGC	
TVIN	ATTGAGACTATTCGGTATTACCTGC	
TSOC	CATTGCTGCCTGCCGCTCGACTTG	
TPEC	CTCCAACTTATATGACCTTATCCG	
TMAL	CTATTGTGCTTATTCATCAGGC	
TLEC	CACTCTCAGAAAGGAGCAAGCTCC	
BFOS	CGTATCTCATTTTATTCCCCTGTA	
PGIN	TACTCGTATCGCCCGTTATTC	

The probe TSOC could detect T. socranskii subsp. socranskii and T. socranskii subsp. buccale.

Dot-blot hybridization. After denaturation of the PCR products at 9 5 for 5 min, $2\mu\ell$ aliquots were blotted onto the nylon membrane (Hybond N, Amersham) and fixed by UV cross-linking for 3min (Ultraviolet crosslinker, UVP, Inc., Upland, CA, USA). After 30 minute-prehybridization at the probe-specific temperature in the hybridization buffer (5×SSC, 0.1% N-laurosylsarcosine, 0.02% SDS, 1%

blocking reagent), hybridization was performed in the same buffer for 1 h after the addition of a DIG-labeled oligonucleotide probe (50 pmol). Two stringent washes were done at the hybridization temperature for 30 min with a washing buffer (5×SSC, 0.1% SDS). After the addition of anti-DIG-alkaline phosphatase conjugates according to the manufacturers recommendations. the DIG-labeled probes were detected with the chemiluminiescent substrate CSPD (Boehringer Mannheim, Germany). The X-ray films were exposed to the membranes for 2 to 5 h.

For hybridization using another probe, the membranes were washed twice in a stripping buffer (0.1M NaOH, 0.1% SDS) at 37 for 15 min, and equilibrated with 2×SSC. Subsequently, hybridization was performed as above.

Statistical Analysis. To determine the associations between the species, statistical analysis outlined in the previous investigation was performed (7). Briefly, the odds ratios were computed from logistic regression analysis (SAS 6.12 program). In this analysis, the presence or absence of individual species was used as a response variable and the other species as an independent variable, respectively. When the odds ratio was above 2.0 and the confidence range did not include 1.0, the association was concluded to be significant.

III. Results

A total of 73-PCR products were obtained from 79 teeth. Among these products, 43 samples did not react with any of the probes employed in this study. Hybridization signals were observed in remaining 30 samples, and 4 species were detected. The number of individual species detected in this study is shown in Table 3. Under the conditions of our investigation, no cross hybridization was observed except for the TMAL probe, which showed a hybridization signal with both *T. lecithinolyticum* and *T. maltophilum*. Since the TLEC probe did not react with any of the samples in this study, we regarded the isolates that reacted with the TMAL probe as *T. maltophilum*. Among the oral treponemes investigated, *T. maltophilum* (19 samples) and *T. socranskii* (2 samples) were the only species that were observed. The other treponemes investigated were not detected in this study.

P. gingivalis and B. forsythus were found in 20 and 12 samples, respectively. Due to the limited number of T. socranskii, the microbial association was only evaluated on T. maltophilum, P. gingivalis and B. forsythus (Table 4). Significant associations between the 3 species were identified and are summarized in Table 5.

Table 3. Microorganisms detected from root canals

Microbial species	No. of samples		
T. maltophilum	19		
T. socranskii	2		
P. gingivalis	20		
B. forsythus	12		

Table 4. The observed frequencies of the 3 species individually and in different combinations.

1st species	2nd species	absence of both	1st only	2nd only	presence of both
T. maltophilum	P. gingivalis	44	9	10	10
P. gingivalis	B. forsythus	50	11	3	9
B. forsythus	T. maltophilu	m 49	5	12	7

Table 5. Odds ratios of associations among the selected organisms

Species	Odds ratio	95% Confidence lower	Intervals upper
T. maltophilum / P. gingivalis	4.889	1.575	15.171
P. gingivalis / B. forsythus	13.636	3.165	58.749
T. maltophilum / B. forsythus	5.717	1.543	21.183

The significance of associations between 3 species was tested using the logistic regression analysis. All of them were statistically significant.

IV. Discussion

Although Brown et al. (12) described the presence of spirochetes in their pulp samples about 40 years ago, the role of these organisms in root canal infections has been underestimated. Some authors (29) have suggested that the presence or absence of oral spirochetes might be an aid in differentiating endodontic and periodontal abscesses. It is obvious that spirochetes are found more frequently in the subgingival plaque than in the root canals. However, these findings may not be relevant when we speak of the effects of the oral treponemes in endodontic infections. Recent molecular genetic analyses (6, 7) have revealed that spirochetes are found frequently in the infected root canals, which concurs with this study. With the exception of Molven et als study (13), the incidence of treponemes in this study was higher than that of the previous studies (6, 15). It is likely that this difference is due to the methodology used. It is generally accepted that PCR has a higher sensitivity than "Checkerboard" and light microscopy-based methods (6, 28).

The intriguing feature about the present study is that most of the oral treponemes in the root canals were T. maltophilum, which is a representative of the phylogenic group IV treponemes and was recently isolated by Wyss et al (22). T. maltophilum is a small motile treponeme and has two periplasmic flagella. The organism was frequently isolated from patients with rapidly progressive periodontitis (28). The virulence factors of the bacteria are currently under investigation. Heuner et al. (30, 31) proposed that the motility of T. maltophilum, caused by rotation of the periplasmic flagella, might contribute significantly to its

pathogenicity. Although we found that T. maltophilum is present in many root canals, we are not certain whether the cell has a key role in mediating the destructive effects of an endodontic infection. Since the bacterium was strongly postulated as an important pathogen in periodontitis, investigating its role in endodontic pathology is worthwhile. Siqueira et al. (6) observed T. denticola in root canals, and it was, therefore, unexpected that T. denticola was not detected in this study. Dahle et al. (15) found that their isolates differed from T. denticola, T. socranskii subspecies, and T. pectinovorum. They believed that their endodontic isolates represented two new species. However, it is difficult to compare their study with ours because of different methodologies used. Siqueira et al. (6) used DNA-DNA hybridization to detect the anaerobes from the root canals. Moreover, they did not include a specific probe for T. maltophilum. The checkerboard method has been widely used to investigate the microbial ecology. However, one concern with this method is the specificity of the DNA probes employed. In addition, Socransky et al. (8) also mentioned the possibility of cross-reactions within genera. We used oligonucleotide probes based on 16S rRNA sequences to discriminate species, which are less likely to cross-react (32). However, we cannot suggest that T. denticola does not exist in root canals. Nevertheless, it seems reasonable to conclude that other spirochetal species such as T. maltophilum prevail in root canal systems. Although the TMAL probe used in this study to detect T. maltophilum cross-reacted with T. lecithinolyticum, the closest cultivable relative of T. maltophilum (25), it did not exhibit cross-reactions with any of the other spirochetes investigated. Our results showed that the organisms regarded as T.

maltophilum were not T. lecithinolyticum. However, the possibility could exist that they were a previously unclassified species of the phylogenic group IV treponemes.

It was interesting to compare the distribution of oral spirochetes in the root canals with the subgingival plaque samples. It appears that for oral spirochetes, the periodontal pocket is a more favorable refuge than the root canal. Using a similar methodology, Moter et al. (28) revealed that T. socranskii (96.2%) was most frequently found in the deep periodontal pocket, followed by T. maltophilum (66.0%), T. denticola (62.3%), and T. vincentii (20.8%). Although spirochetes in the root canals were not so diverse as in the periodontal pockets, they are similar in that T. socranskii and T. maltophilum were more frequently found than the other spirochetes. Many investigators have reported that T. denticola is most frequently associated with chronic periodontal disease (33, 34). However, as Moter et al. (28) mentioned, it remains to be determined whether this organism is of etiologic relevance or merely the most easily cultured organism. In their study, T. maltophilum was detected much more often in disease sites than in the respective healthy sites. Dewhirst et al. (17) also corroborated this finding. As a consequence of these investigations (28) and our own, T. maltophilum should be included in any etiologic study of endodontic disease as well as periodontitis.

In terms of microbial associations, some authors (8) have shown that P. gingivalis, B. forsythus, and T. denticola have intimate associations with each other. Since T. denticola could not be detected in this study, such microbial associations were analyzed by substituting T. maltophilum for T. denticola. The results showed that T. maltophilum frequently appeared

with P. gingivalis and B. forsythus. When one considers that the root canal system is an ideal place in investigating the microbial ecology, these results appear to be very meaningful in understanding the microbial associations. Accordingly, previous investigations (6-8) and this study have indicated that the role of oral treponemes should be considered in the view of microbial complex as well as the individual species. Socransky et al. (8) suggested that these microbial complexes are intimately related to the clinical parameters. But, we did not perform these analyses during this study for the following reasons; it appears that the severity of infection relies not only on the presence of bacteria, but also on the quantity of pathogens present. The PCR, which we used, was inappropriate for the quantitative determination of the pathogens. In addition, spirochetal diseases have some important characteristics, such as their chronic and episodic nature. As a consequence, further detailed investigation combining both quantitative and qualitative measurements is necessary in understanding the role of these microbial complexes in root canal infections.

In conclusion, among the oral spirochetes investigated, *T. maltophilum* was the most frequently found. In addition, this pathogen was significantly associated with *P. gingivalis* and *B. forsythus*. These findings provide some evidence for the potential effects of treponemes in endodontic infections as well as in periodontal diseases.

V. Conclusion

The aim of this study was to identify the isolates of oral spirochetes at the species-level in endodontic infections and determine their association with *Bacteroides forsythus* and *Porphyromonas gingivalis*. Seventy-nine teeth with apical periodontitis were selected for this study. After sampling from the root canals aseptically, PCR amplification for the 16S rRNA gene was performed with eubacterial universal primers. Subsequently, dot-blot hybridization was performed with 8 species-specific oligonucleotide probes. The microbial associations were analyzed using the odds ratio. The results were as follows;

- 1. The most frequently found species was P. gingivalis (27.4%), followed by Treponema maltophilum (26%), B. forsythus (16.4%) and Treponema socranskii (2.7%). The other treponemes including Treponema denticola were not detected in our samples.
- 2. Significant microbial associations were identified between T. maltophilum, B. forsythus and P. gingivalis by utilizing analysis with the odds ratio.

The results indicate that T. maltophilum should be included in the etiologic studies of endodontic diseases.

References

- 1. Sundqvist G. Taxonomy, ecology, and pathogenecity of the root canal flora. Oral Surg Oral Med Oral Pathol 1994;78:522-30.
- 2. Haapasalo M. Bacteroides spp. in dental root canal infections. Endod

 Dent Traumatol 1989;5:1-10.
- 3. Griffee MB, Patterson SS, Miller CH, Kafraway AH, Newton CW. The relationship of Bacteroides melaninogenicus to symptoms associated with pulpal necrosis. Oral Surg Oral Med Oral Pathol 1980;50:457-61.
- 4. Sundqvist G, Johansson E, Sjogren U. Prevalence of black-pigmented

 Bacteoides species in root canal infections. J Endodon

 1989;15:13-9.
- 5. Conrads G, Gharbia SE, Lampert F, Shah HN. The use of a 16S rDNA directed PCR for the detection of endodontopathogenic bacteria. J Endodon 1997;23:433-8.
- 6. Siqueira JF Jr, Rocas IN, Souto R, de Uzeda M, Colombo AP. Checkerboard DNA-DNA hybridization analysis of endodontic infections. Oral Sur Oral Med Oral Pathol Oral Radiol Endodontics. 2000;89:744-8.
- 7. Jung IY, Choi Bk, Kum KY, Roh BD, Lee SJ, Lee CY et al. Molecular epidemiology and association of putative pathogens in root canal infection. J Endodon 2000;26:599-604.
- 8. Socransky SS, Haffajee AD, Cugini MA, Smith C, Kent RL Jr.

 Microbial complexes in subgingival plaque. J Clin Periodontol
 1998;25:134-44.

- 9. Ashimoto A, Chen C, Bakker I, Slots J. Polymerase chain reaction detection of 8 putative periodontal pathogens in subgingival plaque of gingivitis and advanced periodontitis lesions. Oral Microbiol Immunol 1996;11:266-73.
- 10. Bartels HA, Naidorf IJ, Blechman H. A study of some factors associated from root canals. Oral Surg Oral Med Oral Pathol 1968;25:255-61.
- 11. Gomes BPFA, Lilley JD, Drucker DB. Associations of endodontic symptoms and signs with particular combinations of specific bacteria. Int Endod J 1996;29:69-75.
- 12. Brown LR Jr., Rudolph CE Jr. Isolation and identification of microorganisms from unexposed canals of pulp-involved teeth. Oral Surg Oral Med Oral Pathol 1957;10:1094-9.
- 13. Molven O, Olsen I, Kerekes K. Scanning electron microscopy of bacteria in the apical part of root canals in permanent teeth with periapical lesions. Endod Dent Traumatol 1991;7:226-9.
- 14. Dahle UR, Tronstad L, Olsen I. Observation of an unusually large spirochete in endodontic infection. Oral Microbiol Immunol 1993;8:251-3.
- 15. Dahle UR. Tronstad L. Olsen I. Characterization of new periodontal and endodontic isolates of spirochetes. Eur J Oral Sci 1996;104:41-7.
- 16. Choi BK, Paster BJ, Dewhirst FE, Gobel UB Diversity of cultivable and uncultivable oral spirochetes from a patient with severe destructive periodontitis. Infect. Immun 1994;62:1889-95.

- 17. Dewhirst FE, Tamer MA, Ericson RE, Lau CN, Levanos VA, Boches SK et al. The diversity of periodontal spirochetes by 16S rRNA analysis. Oral Microbiol Immunol 2000 ;15:196-202.
- 18. Chan EC, Siboo R, Keng T, Psarra N, Hurley R, Cheng SL et al.

 Treponema denticola (ex Brumpt 1925) sp. nov.,nom.rev.,and identification of new spirochete isolated from periodontal pockets. Int J Syst Bacteriol 1993;43:196-203.
- 19. Smibert RM. Gen III. Treponema Schudinn 1905, 1728^{a1}. In Krieg NR, Holt JG, ed. Bergey's manual of systematic bacteriology, vol.1. Baltimore: Williams & Wilkins, 1984:49-57.
- 20. Smibert RM, Johnson JL, Ranney PR. 1984. Treponema socranskii sp. nov., Treponema socranskii subsp. socranskii subsp. nov., Treponema socranskii subsp. buccale subsp. nov., Treponema socranskii subsp. paredis subsp. nov. isolated from the human periodontia. Int J Syst Bacteriol 1984;34:457-62.
- 21. Smibert RM, Burmeister JA. Treponema pectinovorum sp., nov. isolated from humans with periodontitis. Int J Syst Bacteriol 1983;33:852-6.
- 22. Wyss C. Choi BK. Schupbach P. Guggenheim B. Gobel UB.

 *Treponema maltophilum sp. nov., a small oral spirochete isolated from human periodontal lesions. Int J Syst Bacteriology. 1996;46(3):745-52.
- 23. Umemoto T, Nakazawa F, Hoshino E, Okada K, Fukunaga M, Namikawa I. *Treponema medium sp.* nov., isolated from human subgingival dental plaque. Int J Syst Bacteriol 1997;47:67-72.

- 24. Wyss C. Choi BK. Schupbach P. Guggenheim B. Gobel UB.
 Treponema amylovorum sp. nov., a saccharolytic spirochete of medium size isolated from an advanced human periodontal lesions. Int J Syst Bacteriology. 1997;47:842-5.
- 25. Wyss C. Choi BK. Schupbach P. Moter A. Guggenheim B. Gobel UB.

 *Treponema lecithinolyticum sp. nov., a small saccharolytic spirochete with phospholipase A and C activities associated with periodontal diseases. Int J Systematic Bacteriology.

 1999;49:Pt 4:1329-39.
- 26. Grenier D. Nutritional interactions between two suspected periodontopathogens, *Treponema denticola* and *Porphyromonas gingivalis*. Infect. Immun 1992;60:5298-301.
- 27. Kesavalu L, Holt SC, Ebersole JL. Virulence of a polymicrobic complex, *Treponema denticola* and *Porphyromonas gingivalis*, in a murine model. Oral Microbio Immunol 1998;13:373-7.
- 28. Moter A, Hoenig C, Choi BK, Riep B, Gobel UB Molecular epidemiology of oral treponemes associated with periodontal disease J. Clin. Microbiol. 1998;36:1399-1403.
- 29. Trope M, Tronstad L, Rosenberg ES, Listgarten M. Darkfield microscopy as a diagnostic aid in differentiating exudates from endodontic and periodontal abscesses. J Endodon. 1988;14:35-8.
- 30. Heuner K. Choi BK. Schade R. Moter A. Otto A. Gobel UB. Cloning and characterization of a gene (mspA) encoding the major sheath protein of *Treponema maltophilum* ATCC 51939(T). J Bacteriol. 1999;181:1025-9.

- 31. Heuner K. Grosse K. Schade R. Gobel UB. A flagellar gene cluster from the oral spirochaete *Treponema maltophilum*. Microbiology. 2000;146 (Pt 2):497-507.
- 32. Melvin WL. Assad DA. Miller GA. Gher ME. Simonson L. York AK.

 Comparison of DNA probe and ELISA microbial analysis

 methods and their association with adult periodontitis. J

 Periodontol. 1994;65:576-82.
- 33. Moore WE, Moore LH, Ranney RR, Smibert RM, Burmeister JA, Schenkein HA. The microflora of periodontal sites showing active destructive progression. J Clin Periodontol 1991;18:729-39.
- 34. Socransky SS, Haffajee AD. Microbial mechanisms in the pathogenesis of destructive periodontal disease: a critical assessment. J Periodontal Res. 1991;26:195-212.

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Bacteroides 가 forsythus B. forsythus Porp hy rom on as 가 79 가 gingivalis 가 16S rRNA B. forsythus P. gingivalis 6 가 . 가 P. gingivalis (27.4%) Treponema maltophilum (26%), B. forsythus (16.4%) Treponema socranskii (2.7%). Treponema denticola T. maltophilum, B. forsythus P. gingivalis T. maltophilum