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**UNITED STATES DISTRICT COURT
SOUTHERN DISTRICT OF CALIFORNIA**

SHERRIE OLIVER and MICHAEL
TESTONE, on behalf of themselves, all others
similarly situated, and the general public,

Plaintiffs,

v.

THE PROCTER & GAMBLE CO.,

Defendant.

Case No.: '26CV3859 JO B JW

CLASS ACTION

**COMPLAINT FOR CONSUMER
FRAUD AND BREACH OF
WARRANTY**

DEMAND FOR JURY TRIAL

1 Plaintiffs SHERRIE OLIVER and MICHAEL TESTONE, on behalf of themselves, all
 2 others similarly situated, and the general public, by and through their undersigned counsel,
 3 hereby bring this action against Defendant THE PROCTER & GAMBLE CO. (“P&G”), and
 4 allege the following upon their own knowledge, or where they lack personal knowledge, upon
 5 information and belief, including the investigation of their counsel.

6 **INTRODUCTION**

7 1. P&G sells a variety of toothpastes under the Crest Pro-Health brand, which it
 8 markets as delivering improved gum health and treatment of gingivitis (the “Products”¹).

9 2. These representations are misleading, however, because the Products contain
 10 sodium lauryl sulfate (“SLS”), a harsh detergent and known irritant that, at the levels present
 11 in the Products, can damage gum and mouth tissue, inhibit wound healing, trigger
 12 inflammation, cause allergic and contact-sensitivity reactions and epithelial sloughing, and
 13 disrupt the oral microbiome. These are the very conditions P&G claims the Products prevent
 14 or reduce.

15 3. Plaintiffs bring this action against P&G on behalf of themselves, similarly
 16 situated Class Members, and the general public to enjoin P&G from deceptively marketing
 17 the Products in this manner and to recover compensation for injured Class Members.

18 **JURISDICTION AND VENUE**

19 4. This Court has original jurisdiction over this action under 28 U.S.C. §
 20 1332(d)(2) (The Class Action Fairness Act) because the matter in controversy exceeds the
 21 sum or value of \$5,000,000, exclusive of interest and costs and at least one member of the
 22 class of plaintiffs is a citizen of a state different from P&G. In addition, more than two-thirds
 23 of the Members of the Class reside in states other than the state in which P&G is a citizen
 24 and in which this case is filed, and therefore any exceptions to jurisdiction under 28 U.S.C.
 25 § 1332(d) do not apply.

26 _____
 27 ¹ This includes at least the following varieties: Advanced Gum Protection, Advanced Gum
 28 Restore, Enamel Repair and Gum, Gum Detoxify Plus, Gum and Enamel Restore, Gum and
 Sensitive, Gum Recession, and Gum and Whitening.

5. The Court has personal jurisdiction over P&G as a result of its substantial, continuous and systematic contacts with the State, and because P&G has purposely availed itself of the benefits and privileges of conducting business activities within the State, including by marketing, distributing, and selling the Products in California.

6. Venue is proper in this Southern District of California pursuant to 28 U.S.C. § 1391(b) and (c), because P&G resides (*i.e.*, is subject to personal jurisdiction) in this district, and because a substantial part of the events or omissions giving rise to the claims occurred in this district.

PARTIES

7. Plaintiff Sherrie Oliver is a citizen of California who resides in Riverside County, California.

8. Plaintiff Michael Testone is a citizen of California who resides in San Diego County, California.

9. Defendant The Proctor & Gamble Company is an Ohio corporation with its principal place of business in Cincinnati, Ohio.

FACTS

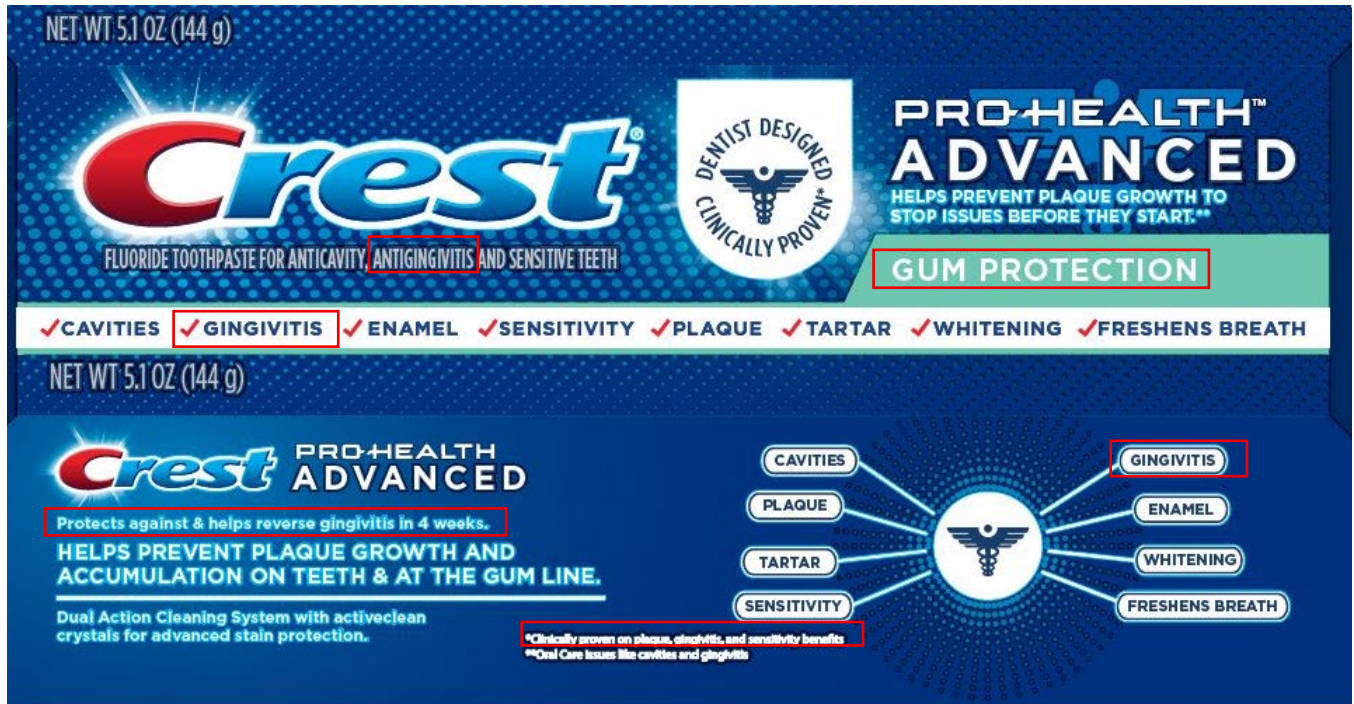
I. P&G MARKETS THE PRODUCTS AS PROMOTING ORAL HEALTH

10. During the four years preceding the filing of this Complaint and continuing today, P&G has manufactured, distributed, and sold the Products throughout California.

11. The Products' labels make largely uniform representations concerning oral health. While the specific language and placement may vary slightly from product to product, the overall message is consistent: the Products promote improved gum health and treatment or reversal of gingivitis.

A. Advanced Gum Protection

12. As depicted below, the label of Crest Pro-Health Advanced Gum Protection Toothpaste contains oral health representations including “GUM PROTECTION,” “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “Protects against & helps reverse gingivitis in 4 weeks,” “Clinically proven on . . . gingivitis,” and “✓GINGIVITIS.”



B. Advanced Gum Restore

13. As depicted below, the label of Crest Pro-Health Advanced Gum Restore Toothpaste contains oral health representations including “GUM RESTORE,” “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “Promotes Gum Healing,” “Clinically Proven Healthier Gums,” and “Promotes healing and helps gums return to a healthier condition fast.”



C. Enamel Repair and Gum

14. As depicted below, the label of Crest Pro-Health Enamel Repair and Gum Toothpaste contains oral health representations including “GUM,” “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “Helps reverse early gum damage in 2 weeks,” “Helps reverse gingivitis,” “Clinically proven to fortify gums,” and “PREVENTS HARMFUL OXIDANTS BY REVERSING GINGIVITIS.”



D. Gum Detoxify Plus

15. As depicted below, the label of Crest Pro-Health Gum Detoxify Toothpaste contains oral health representations including “GUM DETOXIFY,” “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “CLINICALLY PROVEN HEALTHIER GUMS IN 1 WEEK,” “CLINICALLY PROVEN TO FORTIFY GUMS,” and “PREVENTS HARMFUL OXIDANTS BY REVERSING GINGIVITIS.”



E. Sensitive and Gum

16. As depicted below, the label of Crest Pro-Health Sensitive and Gum Toothpaste contains oral health representations including “GUM,” “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “strengthens gums,” “CLINICALLY PROVEN TO FORTIFY GUMS,” and “Dissolves & lifts away gum harming plaque.”



F. Gum Recession

17. As depicted below, the label of Crest Pro-Health Gum Recession Toothpaste contains oral health representations including “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “GUM RECESSSION,” “Reverses weak spots, even in areas of RECESSSION,” “reverse gingivitis even in areas of recission,” “CLINICALLY PROVEN HEALTHIER GUMS IN 1 WEEK,” “FORTIFIES GUMS,” and “GUM RECESSSION.”



G. Gum and Enamel Restore

18. As depicted below, the label of Crest Pro-Health Gum and Enamel Restore Toothpaste contains the oral health representations, “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “GUM . . . RESTORE,” and “Heals gums.”



H. Gum and Whitening

19. As depicted below, the label of Crest Pro-Health Gum and Whitening Toothpaste contains the oral health representations, “TOOTHPASTE FOR . . . ANTIGINGIVITIS,” “GUM,” and “Deeply cleans gums.”



*

*

*

20. The Products’ oral health representations convey a net impression or takeaway message that the Products benefit oral and gum health, and treat or reverse gingivitis.

II. SODIUM LAURYL SULFATE IS AN IRRITANT THAT CAN HARM ORAL HEALTH

21. The mouth is comprised of, *inter alia*, the teeth and its supporting structures, and the inner lips or oral mucosa, which is comprised of specialized epithelial (skin) cells.

22. The specialized tissue surrounding and supporting the teeth is called periodontium. It is comprised of four main tissues: gingiva (gums), periodontal ligament (PDL), cementum, and alveolar bone.

23. The fibroblast is the most abundant cell type of the periodontium and has a central role in homeostasis, pathogenesis, and healing. Sixty-five percent of cells in gingival connective tissue are fibroblasts.²

24. The penetration of oral mucosa by environmental antigens or carcinogens—and subsequent host immune responses—are thought to play important roles in the etiology of several oral mucosal diseases. Accordingly, the oral epithelium is an important physiologic barrier of the human body.³

25. Oral mucosal wounds heal more rapidly and with less scar tissue formation compared to skin wounds, but there are substances that can prolong the healing process of oral wounds.⁴

² Chuang A.H., et al., “Effect of Sodium Lauryl Sulfate (SLS) on Primary Human Gingival Fibroblasts in an In Vitro Wound Healing Model,” 184 Mil. Med. 97-101, at 97 (2019) [“Chuang (2019)”]

³ See Paul, N. et al., “Foaming at the Bit: Sodium Lauryl Sulphate (SLS)-free toothpastes,” 202 NZDA News, pp. 27-36 (March 2021).

⁴ Sabri, H., et al., “The Yin and Yang of Sodium Lauryl Sulfate Use for Oral and Periodontal Health: A Literature Review,” 24 J. Dent. (Shiraz), pp. 262-276 (2023), at 263 (citations omitted) [“Sabri (2023)”].

1 26. Toothpaste—often referred to in the academic literature as “dentifrice”—has
2 become a complex healthcare product, often containing more than 20 ingredients, including
3 formulation excipients and therapeutic or other substances, integrated with the aim of
4 combatting various oral diseases and conditions while providing cosmetic benefits.⁵

5 27. One condition many toothpastes purport to address, including the Products at
6 issue here, is gingivitis. Gingivitis is the inflammation or infection of the gums, usually
7 caused by the buildup of plaque, an aggregation of oral bacterial species embedded in a poly-
8 carbohydrate matrix, which is attached to the tooth’s surface. Gingivitis can lead to
9 periodontitis, an oral infection that can cause irreversible destruction of tooth-supporting
10 structures.⁶

11 28. Sodium lauryl sulfate (SLS) is an anionic surfactant, used to decrease the
12 surface tension of water, and often used in toothpaste for its cleansing and foaming effects.
13 It has been a standard surfactant in toothpastes since the 1970s. Most commercially available
14 toothpastes contain from 0.5 to 2.0% SLS.⁷

15 29. Nevertheless, SLS can irritate mucous membranes in the mouth, cause canker
16 sores and allergic reactions, inhibit gingival healing, and upset the oral microbiome, even in
17 low concentrations.⁸

18
19 ⁵ See Kasi S., et al., “Side Effects of Sodium Lauryl Sulfate Applied in Toothpastes: A
20 Scoping Review,” 35 Am. J. Dent. No. 2, pp. 84-88, at 84 (2022) [“Kasi (2022)”].

21 ⁶ Sabri (2023), *supra* n.4, at 269.

22 ⁷ Chuang (2019), *supra* n.2, at 97; *see also* Lippert, F., “An introduction to toothpaste – its
23 purpose, history and ingredients,” 23 Monographs in Oral Science, Toothpastes, pp. 1-14
(2013) (C. van Loveren ed.).

24 ⁸ See Kasi (2022), *supra* n.5. SLS is also responsible for the peculiar, so-called “orange juice”
25 effect on taste reception, whereby orange juice drunk soon after toothbrushing is rendered
26 unpleasant and astringent. This is due to both direct inhibition of SLS on taste receptors and
27 indirectly through its dissolution of phospholipids that normally block bitter taste receptors.
28 *See* Salazar, S., et al., “The effectiveness of dentifrices without and with sodium lauryl
sulfate on plaque, gingivitis and gingival abrasion—a randomized clinical trial,” 20 Clin.
Oral Invest., pp. 443-450 (2016) [“Salazar (2016)”]; DeSimone, JA, et al., “Surface active

A. Mucosal Desquamation (Inner Lip Sloughing) and Aphthous Ulcers (Canker Sores)

30. Due to their ability to solubilize lipid membranes, surfactants can elicit irritant skin reactions by direct cytotoxicity to oral epithelial cells.⁹

31. One of the first reports of negative effects of SLS on oral health was a 1978 “case report [that] established a cause and effect relationship between SLS and desquamation in a patient taking drugs with anti-sialic activity.”¹⁰ In that patient, “[t]he amount of sloughing was found to be directly related to the use of the SLS-containing toothpaste,” and “[w]hen the toothpaste was discontinued, the desquamation was reversed within 24 hours.”¹¹

32. A pilot study that followed in 1986 compared the effect of a toothpaste containing 2.4 grams of SLS to one containing “no detergents, preservatives, fluoride or other therapeutic agents.”¹² Thirty-two healthy dental hygiene students were divided into two groups, one using the toothpaste containing SLS and the other using the control toothpaste. After a week, the epithelial cells in their saliva were counted to assess the degree of mucosal sloughing. “The results showed an increase in epithelial cell count following

taste modifiers: a comparison of the physical and psychophysical properties of gymnemic acid and sodium lauryl sulfate,” 5 Chem. Senses, No. 4, pp. 317-330 (1980).

⁹ Effendy, I., et al., “Surfactants and experimental irritant contact dermatitis,” 33 Contact Dermatitis, No. 4, pp. 217-225 (1995).

¹⁰ Chuang (2019), *supra* n.2, at 97 (citing Rubright WC, et al., “Oral slough caused by dentifrice detergents and aggravated by drugs with antisialic activity,” 97 J. Am. Dent. Assoc., pp. 215-220 (1978)).

¹¹ *Id.*; see also Sabri (2023), *supra* n.4, at 263 (The “side effects of SLS in oral health” that Rubright *et al* reported “mostly consist of dose-dependent irritative dermal reactions in high-dose usage as well as oral mucosa desquamation and reduction in the function of the protective barrier of oral epithelium due to multi factors.”).

¹² Chuang (2019), *supra* n.2, at 97 (citing Searls JC, et al., “The influence of dentifrice detergents on oral epithelial slough,” 60 Dent. Hyg. (Chic) 20-3 (1986)).

1 expiration of saliva after brushing with an SLS-containing dentifrice for 1 week, compared
2 with the control.”¹³

3 33. A few years later, researchers “compared the topical effect of a test dentifrice
4 with different concentrations of SLS to a placebo dentifrice on visible oral desquamation and
5 epithelial flakes in saliva. Five dentifrices were used varying only in different concentration
6 of SLS (0.0, 0.25, 0.5, 1.0, and 1.5%). They demonstrated a dose-response effect with
7 increasing concentrations of SLS, to the increased incidence of mucosal desquamation.”¹⁴

8 34. The same researchers “observed [that] the denaturing effect of SLS on the oral
9 mucin layer, with exposure of underlying epithelium, induced incidence of recurrent
10 aphthous ulcers (RAU),”¹⁵ known colloquially as canker sores. These results were bolstered
11 by “clinical double-blind crossover study of 30 patients with frequent occurrences of RAU,”
12 which “suggested that an SLS-free toothpaste may be recommended for patients with
13 RAU.”¹⁶

14 35. Another group of researchers found that SLS-free toothpastes “affected the
15 ulcer-healing process and reduced pain in the daily lives of patients with RAU,” and that the
16 “duration of ulcers and mean pain score were significantly decreased during the period using
17 SLS-free dentifrice compared to two SLS-containing dentifrices at 1.5%.”¹⁷ Similarly, a
18 2012 study divided 90 patients into 3 groups and analyzed clinical parameters after
19
20
21

22 ¹³ *Id.*

23 ¹⁴ *Id.* (citing Herlofson BB, et al., “Desquamative effect of sodium lauryl sulfate on oral
mucosa,” 51 Acta. Odontol. Scand., pp. 39-43 (1993)).

24 ¹⁵ *Id.* (citing Herlofson BB, et al., “Sodium lauryl sulfate and recurrent aphthous ulcers. A
25 preliminary study,” 52 Acta. Odontol. Scand. No. 5, pp. 257-919 (1994)).

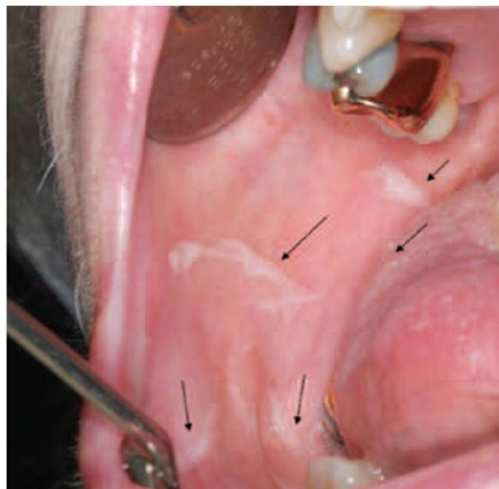
26 ¹⁶ *Id.* (citing Herlofson BB, et al., “The effect of two toothpaste detergents on the frequency
27 of recurrent aphthous ulcers,” 54 Acta. Odontol. Scand. No. 3, 150-3 (1996)).

28 ¹⁷ Chuang (2019), *supra* n.2, at 100 (citing Healy CM, et al., “Effect of sodium lauryl sulfate-
free dentifrice on patients with recurrent ulceration,” 5 Oral. Dis. No. 1, pp. 39-43 (1999)).

1 intervention, finding statistically significant differences in the healing duration of ulcers and
2 pain score in the SLS-free group.¹⁸

3 36. In a 2013 Letter to the British Dental Journal, two practitioners described a
4 patient's oral mucosal peeling, which they opined "may be caused by sodium lauryl sulphate
5 (SLS) containing oral hygiene products[.]"¹⁹

6 Oral epitheliolysis (also known as
7 shedding oral mucosa or oral mucosal
8 peeling) is a rarely described and often
9 unrecognised superficial desquamation
10 of oral mucosa that may be caused by
11 sodium lauryl sulphate (SLS) contain-
12 ing oral hygiene products, though some



18 Fig. 1 Grey-white strips of oral epithelium
19 sloughing from the buccal mucosae and
20 dorsal tongue

21 37. In addition, "[o]ne of the conditions that can cause erosive and ulcerative
22 lesions in the oral cavity is hypersensitivity reaction to substances," and "SLS is known to
23 be . . . involved in the destruction of the oral mucosal epithelium and has the ability to cause
24 contact sensitivity-like reactions, as well as allergic contact reactions and irritating reactions

25 ¹⁸ Sabri (2023), *supra* n.4, at 267 (citing Shim, Y, et al., "Effect of sodium lauryl sulfate on
26 recurrent aphthous stomatitis: a randomized controlled clinical trial," 18 Oral Diseases, pp.
27 655-660 (2012) ["Shim (2012)"]).

28 ¹⁹ Hassona, Y. et al., "Oral Mucosal Peeling," 214 British Dental J., No. 8, p. 374 (Apr. 27,
2013).

on oral mucosa.”²⁰ One researcher showed that “high doses of SLS ($\geq 0.015\%$) lead to epithelial cell degradation.”²¹

38. It has also “been shown that the use of toothpaste containing SLS causes more mouth ulcers in patients than the use of toothpastes without it.”²²

39. The mechanism of SLS’s effect on oral mucosa has been studied. “In one study in animal models,” researchers “reported that sensitivity to low concentrations of SLS is much higher for the oral mucosa than the skin,” and “other reports showed that SLS usage dries up the oral mucosal protective layer and exposes the buccal mucosa and gingiva to irritants.”²³ “However, SLS may also denature the proteins of mucosa considering its affinity to them.”²⁴ SLS “is capable of making gingiva and mucosa vulnerable to exogenous antigens

²⁰ Sabri (2023), *supra* n.4, at 269 (citing Neppelberg E, et al., “Dual effects of sodium lauryl sulphate on human oral epithelial structure,” 16 *Exp. Dermatol.*, pp. 574-579 (2007) [“Neppelberg (2007)”]; Brown RS, et al., “Inflammatory reaction of the anterior dorsal tongue presumably to sodium lauryl sulfate within toothpastes: a triple case report,” 125 *Oral Surg Oral Med Oral Pathol Oral Radiol.* pp. e17-e21 (2018) [“Brown (2018)”]; Ersoy M., et al., “The allergy of toothpaste: a case report,” 36 *Allergol. Immunopathol. (Madr.)*, pp. 368-370 (2008) [“Ersoy (2008)”]; Rantanen I., et al., “The effects of two sodium lauryl sulphate-containing toothpastes with and without betaine on human oral mucosa in vivo,” *Swedish Dent. J.* p. 31 (2003) [“Rantanen (2003)”]).

²¹ *Id.* (citing Neppelberg (2007), *supra* n.20).

²² *Id.* (citing Dewi TS, “Lesi Erosif Mukosa Oral Sebagai Akibat Penggunaan Pasta Gigi Mengandung Sodium Lauryl Sulfate,” 2 *J. Material Kedokteran Gigi.*, pp. 75-82 (2013)).

²³ *Id.* at 263 (citing Ahlfors EE, et al., “Contact sensitivity reactions in the oral mucosa,” 59 *Acta. Odontol. Scand.*, pp. 248-254 (2002); Rantanen I, et al., “Effects of a betaine-containing toothpaste on subjective symptoms of dry mouth: a randomized clinical trial,” 4 *J. Contemp. Dent. Pract.*, pp. 11-23 (2003) [“Ahlfors (2002)”]; Macdonald JB, “Oral leukoedema with mucosal desquamation caused by toothpaste containing sodium lauryl sulfate,” 97 *Cutis* pp. E4-E5 (2016); Jensena JL, “Clinical implications of the dry mouth: oral mucosal diseases,” 842 *Ann. N. Y. Acad. Sci.*, pp. 156-162 (1998) [“Macdonald (1998)”]).

²⁴ *Id.* (citing Shim (2012)).

1 by denaturing proteins of mucin” (microproteins that occur in secretions of mucous
2 membranes).²⁵

3 40. As a result, “[m]ucosal and skin permeability are increased by SLS”²⁶
4 “[S]tudies have shown that this substance interrupts the integrity of the cell membrane.”²⁷
5 Moreover, “[i]t is suggested that SLS affects the membrane due to its amorphous solid
6 dispersion property and therefore . . . is a danger to the safety of toothpastes.”²⁸

7 **B. Gingival Wound Healing and Periodontitis**

8 41. The “consumption of SLS can increase the duration of [the] wound healing
9 process.”²⁹

10 42. Several *in vitro* studies have demonstrated SLS’s interference with gingival
11 tissue healing.

12 43. One *in vitro* study showed that applying SLS to cementum, a component of the
13 periodontium, can lead to its physical change, with five-minute exposure resulting in
14 exposing collagen and dentinal tubules.³⁰

16 ²⁵ *Id.* at 269 (citing Siegel IA, et al., “Surfactant-induced alterations of permeability of rabbit
17 oral mucosa in vitro,” 44 Exp. Mol. Pathol., pp. 132-137 (1986)).

18 ²⁶ *Id.* (citing Ahlfors (2002), *supra* n.23).

19 ²⁷ *Id.* at 271 (citing Ghosh, S, et al., “A mulittechnique approach in protein/surfactant
20 interaction study: physiochemical aspects of sodium dodecyl sulfate in the presence of
trypsin in aqueous medium,” 3 Biomacromolecules, pp. 9-16 (2002)).

21 ²⁸ *Id.* (citing Chen, Y et al., “Sodium Lauryl Sulfate Competitively Interacts with HPMC-AS
22 and Consequently Reduces Oral Bioavailability of Posaconazole/HPMC-AS Amorphous
Solid Dispersion,” 13 Mol. Pharm., pp. 2787-2795 (2016); Cvikl, B, et al., “The in vitro
23 impact of toothpaste extracts on cell viability,” 123 Eur. J. Oral. Sci., No. 3, pp. 179-185
24 (June 2015) [“Cvikl (2015)”]).

25 ²⁹ *Id.* (citing Chen, L, et al., “Positional differences in the wound transcriptome of skin and
oral mucosa,” 11 BMC Genomics., p. 471 (2010); Politis C, et al., “Wound healing problems
26 in the mount,” 7 Front. Physiol., p. 507 (2016); Chuang (2019), *supra* n.2).

27 ³⁰ *Id.* (citing Okte E, et al., “Topography of periodontally involved human root surfaces after
28 different chemical treatment modalities: an in vitro scanning electron microscopic study,”
42 J. Oral Sci. pp. 139-146 (2000)).

44. In another study, human gingival fibroblasts (HGFs) were grown in culture plates. A 3 mm wound was created on confluent HGFs, and the cells were challenged with 0 (control), 0.01, 0.02, 0.03, 0.03, or 0.05% SLS-containing media once daily for 2 minutes. The cells were stained every other day and the percent of wound fill area measured. The results were as follows.

Wound Healing %

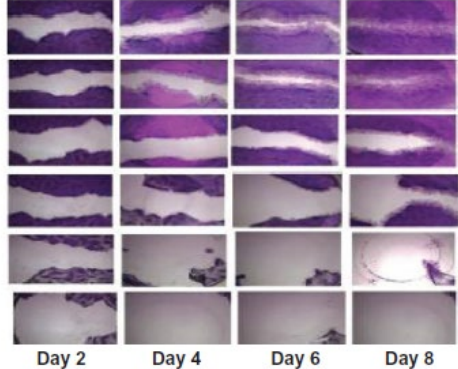
	Day 2	Day 4	Day 6	Day 8
0% SLS	15%	35%	67%	98%
0.01% SLS	10%	20%	65%	84%
0.02% SLS	7%	10%	15%	25%
0.03% SLS	5%	8%		
0.04% SLS				
0.05% SLS				

A



Day 0

B



SLS

0.00%

0.01%

0.02%

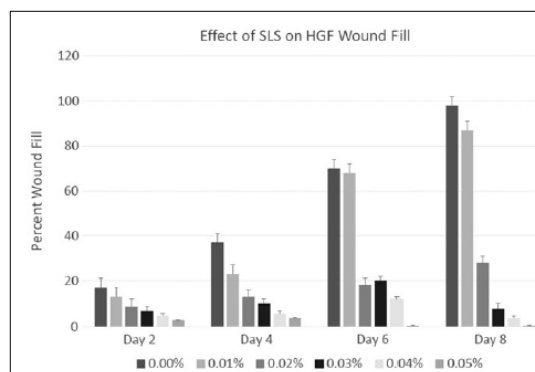
0.03%

0.04%

0.05%

Day 2 Day 4 Day 6 Day 8

Thus, the results showed a dose- and time-dependent inhibition on wound fill by SLS. Moreover, significant inhibitions of wound fills were observed at concentrations of 0.025 and higher, from Day 4. At 0.05% SLS, little wound fill was evident at Day 2, and by Day 4, a large percent of confluent HGF cells had detached.³¹



³¹ Chuang (2019), *supra* n.2.

45. Another study on *in vitro* exposure of fibroblast cells to various toothpaste detergents found that SLS's "half-lethal" concentration was 1%, compared to half-lethal concentrations of 10% and 70% for alternative detergents, Steareth-20 and cocamidopropyl betaine, respectively.³² Thus, "SLS . . . has been shown to have a significant toxic results *in vitro*," with "the toothpaste containing SLS" having "completely compromised cell viability."³³

46. In another study, "SLS showed to be the highest toxic ingredient among the other toothpaste ingredients" tested, "and it presented more than 90% toxicity at whole concentrations on human gingival fibroblasts."³⁴

C. Allergic and Contact-Sensitivity Reactions

47. "SLS is known to be an anionic surfactant involved in the destruction of the oral mucosal epithelium and has the ability to cause contact sensitivity-like reactions, as well as allergic contact reactions and irritating reactions on oral mucosa."³⁵ Some examples are "erythematous irritating reactions, mouth ulcers, oral inflammation, and leukoedema following consumption of SLS-containing toothpastes and products."³⁶ "Allergies to toothpastes containing SLS have also been shown to cause oral lesions."³⁷

48. There are reports of allergic reactions to SLS in the dental-related academic literature. For example, some researchers "reported a 19-year-old female case" with

³² Cvikl (2015), *supra* n.28.

³³ Sabri (2013), *supra* n.4, at 270 (citing Cvikl (2015), *supra* n.28).

³⁴ *Id.* (citing Tabatabaei M et al., "Cytotoxicity of the Ingredients of Commonly Used Toothpastes and Mouthwashes on Human Gingival Fibroblasts," 16 *Frontiers Dent.*, pp. 450-457 (2019)).

³⁵ *Id.* at 269 (citing Macdonald (1998), *supra* n.23; Brown (2018), *supra* n.20; Ersoy (2008), *supra* n.20; Rantanen (2003), *supra* n.20); *see also id.* at 271-72 (SLS "can also affect the oral epithelium negatively, resulting in allergic and hypersensitivity reactions in some patients." (citing Ahlfors (2002), *supra* n.23; Kowitz G et al., "Effects of dentifrices on soft tissues of the oral cavity," 28 *J. Oral Med.*, pp. 105-109 (1973))).

³⁶ *Id.* at 272.

³⁷ *Id.* at 269 (citing Brown (2018), *supra* n.20).

1 exfoliative cheilitis (EC), a “disease that affects the vermilion of one or both lips by
2 continuous production and therefore, desquamation of thick keratin scales.”³⁸ “A test patch
3 revealed the patient was allergic to SLS. Slow healing occurred after cessation of SLS-
4 containing toothpaste and applying glycerin borax and hydrogen peroxide (1%)
5 mouthwash.”³⁹

6 **D. Disruption of the Oral Microbiome**

7 49. The human mouth has the second-most diverse bacterial community in the
8 body, comprised of biofilms formed in different oral cavity niches and including
9 approximately 1,000 species.⁴⁰ These “oral microorganisms protect the human body from
10 invasion by undesirable internal and external perturbations,” but “a disruption of the delicate
11 equilibrium within the microbial ecosystem contributes to various oral and systemic
12 diseases,” such as “gingivitis and periodontitis,” which “affect up to 90% of the world
13 population.”⁴¹

14 50. In 2024, researchers presented the results of a study of the effect of SLS on the
15 oral microecology. They systematically investigated the impact of SLS across three systems:
16 biofilms, animal models, and clinical populations. “SLS was found to kill bacteria in both
17 preformed biofilms (mature biofilms) and developing biofilms (immature biofilms), and
18 disturbed the microbial community structure by increasing the number of pathogenic
19 bacteria. SLS also destroyed periodontal tissue, promoted alveolar bone resorption, and
20 enhanced the extent of inflammatory response level.”⁴²

23 ³⁸ *Id.* (citing Daley TD, et al., “Exfoliative cheilitis,” 24 J. Oral Pathol. Med. pp. 177-179
24 (1995))

25 ³⁹ *Id.*

26 ⁴⁰ Shi Q., et al., “Effects of sodium lauryl sulfate and postbiotic toothpaste on oral
27 microecology,” 16 J. Oral Microb., pp. 1-15 (2024) (citations omitted).

27 ⁴¹ *Id.*, at 1 (citations omitted).

28 ⁴² *Id.*

III. P&G'S ORAL HEALTH MESSAGING FOR THE PRODUCTS IS MISLEADING

51. Gum-health toothpaste occupies a unique place in the marketplace because consumers purchase it specifically to improve diseased or vulnerable gum tissue. Consumers therefore reasonably expect those products not to contain ingredients that the scientific literature has repeatedly associated with irritation, epithelial injury, impaired wound healing, oral barrier disruption, or recurrent aphthous ulcers.

52. Each of the Products contains SLS as an ingredient, likely in a concentration range of about 1%-1.5% based on literature regarding commercially available toothpastes. P&G nevertheless conveys a takeaway message that the Products promote, rather than harm, oral and gum health. Because SLS has known adverse effects on the mouth and gums as described above, these claims are highly misleading.

53. Consumers seeking out gum-health toothpaste are entitled to know the Products contain an ingredient widely recognized in the scientific literature as an oral irritant associated with inflammation, epithelial sloughing, impaired wound healing, recurrent aphthous ulcers, and disruption of the oral mucosal barrier.

54. For this reason, some toothpastes marketed to promote gum health specifically call out their lack of SLS, such as the Colgate Total Active Prevention Gum Protect Toothpaste depicted below.



55. Other examples of brands that market SLS-free toothpastes include Biotène, Burt's Bees, Hello, and Squigle. These companies spend money advertising their products as SLS-free because consumers value that information. Moreover, the existence of a market for SLS-free toothpaste, and manufacturers' decisions to advertise that feature, demonstrates that consumers consider the presence or absence of SLS to be material.

1 56. Despite marketing the Products with oral and gum health claims, P&G does not
2 disclose on its product labeling or website any information about the potential harmful
3 effects of SLS on oral and gum health.

4 57. P&G is under a duty to disclose this information to consumers because (a) P&G
5 is revealing *some* information about its products—enough to suggest they promote oral and
6 gum health—without revealing additional material information, (b) P&G’s deceptive
7 omissions concern human health, and specifically the detrimental health consequences of
8 regularly using the Products, (c) P&G was in a superior position to know of the dangers
9 presented by the SLS in its Products, and (d) P&G actively concealed material facts not
10 known to Plaintiffs and other Class Members.

11 58. Average consumers are not familiar with SLS nor aware it is sometimes used
12 in toothpaste. Moreover, although listed in the Products’ (extremely) small-print ingredient
13 list, “less than half of consumers read the entire package labeling before taking [over the
14 counter] medicine.”⁴³ One study found “only 42% of subjects said they read everything on
15 the label when taking an [over the counter] medication for the first time and only 26%
16 reported reading the active ingredients at first use.”⁴⁴ It is likely an even smaller proportion
17 of consumers read the inactive ingredients list on a toothpaste’s often exceedingly small drug
18 facts label, where SLS is listed on the Products.

19 59. P&G had other viable alternatives, as alternative surfactants with lower
20 irritating properties have been investigated and found as alternatives to SLS in toothpaste.
21 This includes, for example, cocamidopropyl betaine (CAPB), sodium methyl cocoyl taurate
22 (SMCT), Poloxamer 407 (also known as Pluronic F127), and Steareth-30, a non-ionic
23
24
25

26
27 ⁴³ Catlin JR et al., “The Effectiveness of Nonprescription Drug Labels in the United States:
28 Insights from Recent Research and Opportunities for the Future,” 6 Pharmacy 119 (2018).

⁴⁴ *Id.*

polyethylene glycol ether of stearic acid, which has been demonstrated to produce significantly fewer soft tissue lesions compared to SLS-containing toothpaste.⁴⁵

IV. PLAINTIFFS' PURCHASE, RELIANCE, AND INJURY

A. Sherrie Oliver

60. Plaintiff Sherrie Oliver regularly purchased Crest Pro-Health Gum Detoxify Plus starting in approximately 2023, with her last purchase in November or December 2025. Ms. Oliver often made her purchases from stores such as Walmart in Moreno Valley and Riverside, California.

61. When purchasing Crest Pro-Health Gum Detoxify Plus, Ms. Oliver was looking for a toothpaste that, *inter alia*, would promote a healthy mouth and gums. In deciding to purchase the product, Ms. Oliver read and relied on labeling claims suggesting the product promoted oral and gum health, including "GUM DETOXIFY," "TOOTHPASTE FOR . . . ANTIGINGIVITIS," "CLINICALLY PROVEN HEALTHIER GUMS IN 1 WEEK," "CLINICALLY PROVEN TO FORTIFY GUMS," and "PREVENTS HARMFUL OXIDANTS BY REVERSING GINGIVITIS."

62. These claims, and the overall oral and gum health message conveyed by the product's labeling, however, were and are deceptive because Crest Pro-Health Gum Detoxify Plus contains SLS, a documented oral irritant.

63. Ms. Oliver observed that she experienced pain, discomfort, and sensitivity in her teeth and gums after using the Crest Pro-Health Gum Detoxify Plus toothpaste for an extended period of time.

64. Ms. Oliver would have avoided purchasing Crest Pro-Health Gum Detoxify Plus if she knew it contained an irritant that can harm oral health, including harming the gums and causing inflammation. At the time Ms. Oliver purchased Crest Pro-Health Gum Detoxify Plus, she was not familiar with SLS as an ingredient, nor knowledgeable about its

⁴⁵ Salazar (2016), *supra* n.8; Green A, et al., "A randomised clinical study comparing the effect of Steareth 30 and SLS containing toothpastes on oral epithelial integrity (desquamation)," 80 J. Dent., pp. 533-539 (2019).

1 detrimental oral health effects, and did not notice SLS as an inactive ingredient in the
2 Product.

3 **B. Michael Testone**

4 65. Plaintiff Michael Testone regularly purchased Crest Pro-Health Gum Detoxify
5 Plus starting in approximately 2018, with his last purchase in February 2026. Mr. Testone
6 often made his purchases from stores such as Target in San Diego, California, and from
7 online retailers such as Amazon.

8 66. When purchasing Crest Pro-Health Gum Detoxify Plus toothpaste, Mr. Testone
9 was looking for a toothpaste that, *inter alia*, would promote a healthy mouth and gums. In
10 deciding to purchase the product, Mr. Testone read and relied on labeling claims suggesting
11 the product promotes oral and gum health, including “GUM DETOXIFY,” “TOOTHPASTE
12 FOR . . . ANTIGINGIVITIS,” “CLINICALLY PROVEN HEALTHIER GUMS IN 1
13 WEEK,” “CLINICALLY PROVEN TO FORTIFY GUMS,” and “PREVENTS HARMFUL
14 OXIDANTS BY REVERSING GINGIVITIS.”

15 67. These claims, and the overall oral and gum health message conveyed by the
16 product’s labeling, however, were and are deceptive because Crest Pro-Health Gum
17 Detoxify Plus toothpaste contains SLS, a documented oral irritant.

18 68. Mr. Testone would have avoided any Crest Pro-Health toothpaste if he knew it
19 contained an irritant that can harm oral health, including harming the gums and causing
20 inflammation. At the time Mr. Testone purchased Crest Pro-Health Gum Detoxify Plus, he
21 was not familiar with SLS as an ingredient, nor knowledgeable about its detrimental oral
22 health effects, and did not notice SLS as an inactive ingredient in the Product.

23 * * *

24 69. Plaintiffs acted reasonably in relying on the challenged labeling claims, which
25 P&G placed on the Products’ labeling with the intent of inducing average consumers into
26 purchasing the Products.

1 70. Plaintiffs acted reasonably in purchasing the Products, whose labels did not
2 disclose the negative oral health effects of SLS, and in fact conveyed to reasonable
3 consumers that the products promote a healthy mouth and gums.

4 71. The Products cost more than similar products without misleading labeling and
5 would have cost less absent P&G's affirmative oral health statements and deceptive
6 omissions regarding the Products' SLS content.

7 72. Through its misleading labeling and omissions concerning the Products, P&G
8 was able to gain a greater share of the toothpaste market than it otherwise would have, and
9 was able to increase the size of the market.

10 73. Plaintiffs paid more, and would only have been willing to pay less, or would be
11 unwilling to purchase the Products at all, absent the misleading labeling complained of
12 herein.

13 74. I Instead of receiving products that worked as advertised, the Products Plaintiffs
14 and other Class Members received expose consumers to adverse oral health effects
15 inconsistent with their represented benefits. For these reasons, the Products had less value
16 than what Plaintiffs and other Class Members paid for them.

17 75. Plaintiffs and other Class Members lost money as a result of P&G's deceptive
18 claims, omissions, and practices in that they did not receive what they paid for when
19 purchasing the Products.

20 76. Plaintiffs still wish to purchase toothpaste products that promote oral and gum
21 health, and continue to see the Products at the stores in which they regularly shop. Plaintiffs
22 would purchase the Products in the future if they could be assured they do not contain any
23 ingredients that undermine the products' represented efficacy. But unless P&G is enjoined
24 in the manner Plaintiffs request, they will not be able to reasonably determine in the future
25 whether the Products actually promote healthy gums.

26 77. Plaintiffs' substantive right to a marketplace free of fraud, where they are
27 entitled to rely on representations such as those made by P&G with confidence, continues to
28 be violated every time Plaintiffs are exposed to the Products' labels.

1 78. Plaintiffs' legal remedies are inadequate to prevent these future injuries.

2 **CLASS ACTION ALLEGATIONS**

3 79. While reserving the right to redefine or amend the class definition prior to or as
4 part of a motion seeking class certification, pursuant to Federal Rule of Civil Procedure 23,
5 Plaintiffs seek to represent a class of all persons in California who, at any time from four
6 years preceding the date of the filing of this Complaint to the time a class is notified (the
7 "Class Period"), purchased, for personal or household use, and not for resale or distribution,
8 any of the Products (the "Class").

9 80. The Members in the proposed Class are so numerous that individual joinder of
10 all Members is impracticable, and the disposition of the claims of all Class Members in a
11 single action will provide substantial benefits to the parties and Court.

12 81. Questions of law and fact common to Plaintiffs and the Class include:

13 a. Whether, through labeling and advertising the Products, P&G
14 communicated a takeaway message that the Products promote oral and gum health;

15 b. Whether that message was material, or likely to be material, to a
16 reasonable consumer, or whether P&G had reason to believe it was;

17 c. Whether, due to the Products' SLS content, the challenged labeling is
18 false, misleading, or reasonably likely to deceive a reasonable consumer;

19 d. Whether P&G was under a duty to disclose information about the
20 Products' SLS content;

21 e. Whether P&G omitted information about the Products' SLS content;

22 f. Whether P&G's omission was material, or likely to be material to a
23 reasonable consumer;

24 g. Whether P&G's omission was likely to deceive a reasonable consumer;

25 h. Whether P&G was unjustly enriched;

26 i. Whether Plaintiffs and other Class Members are entitled to monetary
27 damages and the measure of those damages; and
28

j. Whether Plaintiffs and other Class Members are entitled to restitution, disgorgement and/or other equitable and injunctive relief, and its proper scope.

82. These common questions of law and fact predominate over questions that affect only individual Class Members.

83. Plaintiffs' claims are typical of other Class Members' claims because they are based on the same underlying facts, events, and circumstances relating to P&G's conduct. Specifically, all Class Members, including Plaintiffs, were subjected to the same misleading and deceptive conduct when they purchased the Products and suffered economic injury because the Products are misrepresented.

84. Plaintiffs will fairly and adequately represent and protect the interests of the Class, have no interests incompatible with the interests of the Class, and have retained counsel competent and experienced in class action litigation, and specifically in litigation involving the false and misleading advertising of consumer goods.

85. Class treatment is superior to other options for resolution of the controversy because the relief sought for each Class Member is small, such that, absent representative litigation, it would be infeasible for Class Members to redress the wrongs done to them.

86. P&G has acted on grounds applicable to the Class, thereby making appropriate final injunctive and declaratory relief concerning the Class as a whole.

87. As a result of the foregoing, class treatment is appropriate under Fed. R. Civ. P. 23(a), 23(b)(2), and 23(b)(3).

CAUSES OF ACTION

FIRST CAUSE OF ACTION

Violations of the Unfair Competition Law, Cal. Bus. & Prof. Code §§ 172000, *et seq.*

88. Plaintiffs reallege and incorporate the allegations elsewhere in the Complaint as if set forth fully herein.

89. The UCL prohibits any "unlawful, unfair or fraudulent business act or practice." Cal. Bus. & Prof. Code § 17200.

1 90. The acts, omissions, misrepresentations, practices, and non-disclosures of as
2 alleged herein constitute business acts and practices.

3 **Fraudulent**

4 91. A statement or practice is fraudulent under the UCL if it is likely to deceive a
5 significant portion of the public, applying an objective reasonable consumer test.

6 92. As set forth herein, P&G's health and safety representations relating to the
7 Products are likely to deceive reasonable consumers and the public.

8 **Unlawful**

9 As set forth herein, P&G's oral and gum health representations relating to the Products
10 are "unlawful" under the UCL in that they violate at least the False Advertising Law, Cal.
11 Bus. & Prof. Code §§ 17500 *et seq.* ("FAL"), Consumers Legal Remedies Act, Cal. Civ. Code
12 §§ 1750 *et seq.* ("CLRA"), and 21 U.S.C. § 352 (deeming an over-the-counter drug
13 misbranded if its label is false or misleading).

14 **Unfair**

15 93. P&G's conduct with respect to the labeling, advertising, and sale of the
16 Products with oral and gum health representations was unfair because P&G's conduct was
17 immoral, unethical, unscrupulous, or substantially injurious to consumers, and the utility of
18 its conduct, if any, did not outweigh the gravity of the harm to its victims.

19 94. P&G's conduct with respect to the labeling, advertising, and sale of the
20 Products with oral and gum health representations was also unfair because it violated public
21 policy as declared by specific constitutional, statutory or regulatory provisions, including but
22 not necessarily limited to the FAL, CLRA, and Federal Food, Drug, and Cosmetic Act.

23 95. P&G's conduct with respect to the labeling, advertising, and sale of the
24 Products with oral and gum health representations was and is also unfair because the
25 consumer injury was substantial, not outweighed by benefits to consumers or competition,
26 and not one that consumers themselves could reasonably have avoided. Specifically, the
27 increase in profits P&G obtained through the misleading labeling does not outweigh the harm
28 to Class Members deceived into purchasing the Products believing they were healthy and

safe for regular use when in fact they contain SLS, which is potentially injurious to oral and gum health. Consumers could not have reasonably avoided this harm because SLS and its detrimental effects on oral and gum health is not widely known by average consumers. Further, the harm could have easily been avoided by P&G as it would have cost P&G nothing to refrain from using SLS, the challenged labeling, or the challenged omissions.

* * *

96. P&G profited from the sale of the falsely, deceptively, and unlawfully advertised Products to unwary consumers.

97. P&G's conduct caused and continues to cause substantial injury to Plaintiffs and other Class Members. Plaintiffs have suffered injury in fact as a result of P&G's unlawful conduct.

98. Plaintiffs and other Class Members are likely to continue to be damaged by P&G's deceptive trade practices because P&G continues to disseminate misleading information. Thus, injunctive relief enjoining P&G's deceptive practices is proper.

99. In accordance with Bus. & Prof. Code § 17203, Plaintiffs seek an order enjoining P&G from continuing to conduct business through unlawful, unfair, and/or fraudulent acts and practices.

100. Plaintiffs, on behalf of themselves and the Class, also seek an order for the restitution of all monies from the sale of the Products, which were unjustly acquired through acts of unlawful competition.

101. Because Plaintiffs' claims under the "unfair" prong of the UCL sweep more broadly than their claims under the FAL, CLRA, or UCL's "fraudulent" prong, Plaintiffs' legal remedies are inadequate to fully compensate them for all of P&G's challenged behavior.

102. Moreover, because the Court has broad discretion to award restitution under the UCL and could, when assessing restitution under the UCL, apply a standard different than that applied to assessing damages under the CLRA or commercial code (for Plaintiffs' breach of warranty claims)—and because restitution is not limited to returning to Class Members

monies in which they have an interest, but more broadly serves to deter the offender and others from future violations—the legal remedies available under the CLRA and commercial code are more limited than the equitable remedies available under the UCL, and are therefore inadequate.

SECOND CAUSE OF ACTION

Violations of the False Advertising Law, Cal. Bus. & Prof. Code §§ 17500, *et seq.*

103. Plaintiffs reallege and incorporate the allegations elsewhere in the Complaint as if set forth fully herein.

104. The FAL provides that “[i]t is unlawful for any person, firm, corporation or association, or any employee thereof with intent directly or indirectly to dispose of real or personal property or to perform services” to disseminate any statement “which is untrue or misleading, and which is known, or which by the exercise of reasonable care should be known, to be untrue or misleading.” Cal. Bus. & Prof. Code § 17500.

105. P&G’s business practices as alleged herein constitute unfair, deceptive, untrue, and misleading advertising pursuant to the FAL because P&G has advertised the Products in a manner that is untrue and misleading, which P&G knew or reasonably should have known, and further omitted material information from the Products’ labeling. As alleged herein, the advertisements, labeling, policies, acts, and practices of P&G relating to the Products were likely to mislead consumers acting reasonably.

106. Plaintiffs suffered injury in fact as a result of P&G’s actions as set forth herein because they purchased the Products in reliance on P&G’s false and misleading marketing claims stating or suggesting they promote oral and gum health, and in further reliance on P&G’s deceptive omission of material information concerning the detrimental effects of the Products’ SLS content.

107. P&G profited from the sale of the falsely and deceptively advertised Products to unwary consumers.

108. Pursuant to Cal. Bus. & Prof. Code § 17535, Plaintiffs seek, on behalf of themselves and other Class Members, the restitution of all monies from the sale of the

1 Products, which were unjustly acquired through acts of false advertising, and an Order
2 enjoining P&G from continuing to engage in such acts.

3 109. Because the Court has broad discretion to award restitution under the FAL and
4 could, when assessing restitution under the FAL, apply a standard different than that applied
5 to assessing damages under the CLRA or commercial code (for Plaintiffs' breach of warranty
6 claims)—and because restitution is not limited to returning to Class Members monies in
7 which they have an interest, but more broadly serves to deter the offender and others from
8 future violations—the legal remedies available under the CLRA and commercial code are
9 more limited than the equitable remedies available under the FAL, and are therefore
10 inadequate.

11 **THIRD CAUSE OF ACTION**

12 **Violations of the Consumers Legal Remedies Act, Cal. Civ. Code §§ 1750, *et seq.***

13 110. Plaintiffs reallege and incorporate the allegations elsewhere in the Complaint
14 as if set forth fully herein.

15 111. The CLRA prohibits deceptive practices in connection with the conduct of a
16 business that provides goods, property, or services primarily for personal, family, or
17 household purposes.

18 112. Plaintiffs and other Class Members are “consumers” under Cal. Civ. Code
19 section 1761(d).

20 113. P&G is a “person” under Cal. Civ. Code section 1761(c).

21 114. The Products are “goods” under Cal. Civ. Code section 1761(a).

22 115. Plaintiffs and other Class Members' purchases of the Products are
23 “transactions” under Cal. Civ. Code section 1761(e).

24 116. P&G's false and misleading labeling and other policies, acts, and practices were
25 designed to, and did, induce the purchase and use of the Products for personal, family, or
26 household purposes by Plaintiffs and other Class Members, and violated and continue to
27 violate the following sections of the CLRA:
28

1 a. Section 1770(a)(5): representing that goods have characteristics, uses, or
2 benefits which they do not have;

3 b. Section 1770(a)(7): representing that goods are of a particular standard,
4 quality, or grade if they are of another;

5 c. Section 1770(a)(9): advertising goods with intent not to sell them as
6 advertised; and

7 d. Section 1770(a)(16): representing the subject of a transaction has been
8 supplied in accordance with a previous representation when it has not.

9 117. P&G profited from the sale of the deceptively advertised Products to unwary
10 consumers.

11 118. P&G's wrongful business practices constituted, and constitute, a continuing
12 course of conduct in violation of the CLRA.

13 119. As a result of P&G's wrongful behavior, Plaintiffs and the Class have suffered
14 harm.

15 120. More than 30 days before filing this action, Plaintiffs sent P&G notice of its
16 violations of the CLRA but P&G did not rectify its wrongful practices. Plaintiffs therefore
17 seek restitution, actual damages, punitive damages, attorneys' fees, and prospective
18 injunctive relief.

19 121. In compliance with Cal. Civ. Code § 1780(d), an affidavit of venue is filed
20 concurrently herewith.

21 **FOURTH CAUSE OF ACTION**

22 **Breach of Express Warranties, Cal. Com. Code § 2313**

23 122. Plaintiffs reallege and incorporate the allegations elsewhere in the Complaint
24 as if set forth in full herein.

25 123. Through the Products' labeling, P&G made affirmations of fact or promises, or
26 descriptions of goods that, *inter alia*, the Products promote oral health, improve gum health
27 and reverse gingivitis. These affirmations and descriptions include:

- 28 • "GUM PROTECTION";

- “Protects against & helps reverse gingivitis in 4 weeks”;
- “Clinically proven on . . . gingivitis”;
- “TOOTHPASTE FOR . . . ANTINGIVITIS”;
- “Promotes Gum Healing”;
- “Clinically Proven Healthier Gums”;
- “Promotes healing and helps gums return to a healthier condition fast”;
- “Helps reverse early gum damage in 2 weeks”;
- “Helps reverse gingivitis”;
- “PREVENTS HARMFUL OXIDANTS BY REVERSING GINGIVITIS”;
- “CLINICALLY PROVEN HEALTHIER GUMS IN 1 WEEK”;
- “CLINICALLY PROVEN TO FORTIFY GUMS”;
- “strengthens gums”;
- “reverse gingivitis even in areas of recession”;
- “FORTIFIES GUMS”; and
- “Heals gums.”

124. These representations were part of the basis of the bargain in that Plaintiffs and the Class purchased the Products in reasonable reliance on those statements. Cal. Com. Code § 2313(1).

125. P&G breached its express warranties by selling products that, for the reasons described herein, do not meet the above affirmations, promises, and product descriptions.

126. That breach actually and proximately caused injury in the form of the lost purchase price that Plaintiffs and Class Members paid for the Products.

127. As a result, Plaintiffs seek on behalf of themselves and other Class Members, actual damages arising as a result of P&G’s breach of express warranties, including, without limitation, expectation damages, in an amount to be proven at trial.

FIFTH CAUSE OF ACTION

Breach of Implied Warranty of Merchantability, Cal. Com. Code § 2314

128. Plaintiffs reallege and incorporates the allegations elsewhere in the Complaint as if set forth in full herein.

129. P&G is a merchant with respect to the goods of the kind that were sold to Plaintiffs and other Class Members, and there were, in the sale to Plaintiffs and other Class Members, implied warranties that those goods were merchantable.

130. Specifically, P&G impliedly warranted that the Products were merchantable in that they conform to the promises or affirmations of fact made on the container or label.

131. P&G breached this implied warranty because the Products were falsely advertised in the manner alleged herein, and thus did not conform to the promises or affirmations of fact made on the products' labels.

132. As an actual and proximate result of P&G's conduct, Plaintiffs and other Class Members did not receive goods as impliedly warranted by P&G. As a result, Plaintiffs seek, on behalf of themselves and other Class Members, actual damages, including, without limitation, expectation damages, in an amount to be proven at trial.

PRAYER FOR RELIEF

133. Wherefore, Plaintiffs, on behalf of themselves, all others similarly situated, and the general public, pray for judgment against P&G as to each and every cause of action, and the following remedies:

a. An Order declaring this action to be a proper class action, appointing Plaintiffs as Class Representatives, and appointing Plaintiffs' undersigned counsel as Class Counsel;

b. An Order requiring P&G to bear the cost of Class notice;

c. An Order compelling P&G to destroy all misleading and deceptive advertising materials and product labels, and to recall all offending products;

d. An Order requiring P&G to disgorge all monies, revenues, and profits obtained by means of any wrongful act or practice;

e. An Order requiring P&G to pay restitution to restore all funds acquired by means of any act or practice declared by this Court to be an unlawful, unfair, or fraudulent business act or practice, or untrue or misleading advertising, plus pre-and post-judgment interest thereon;

f. An Order requiring P&G to pay compensatory, statutory, and punitive damages as permitted by law;

g. An award of attorneys' fees and costs; and

h. Any other and further relief that Court deems necessary, just, or proper.

JURY DEMAND

134. Plaintiffs hereby demand a trial by jury on all issues so triable.

Dated: July 2, 2026

/s/ Jack Fitzgerald

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