



▼ POST GRADUATES ABSTRACTS

PG -11 : A CLINICAL STUDY OF ORAL MUCOSAL LESIONS IN PATIENTS ATTENDING DERMATOLOGY OPD IN A TERTIARY CARE CENTRE, PUDUCHERRY

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Background: Oral mucosa reflects the general health of an individual. Clinically /symptomatically in certain systemic diseases oral cavity may be affected first. In dermatological practice certain diseases have mucocutaneous presentation, and so the reason why examination of skin is never complete without the examination of other mucosae. Aims and objectives: To find out the frequency and diversity of oral mucosal lesions in patients attending DVL OPD.

Methods: This is a hospital based observational study, 100 patients with oral mucosal lesions fulfilling the inclusion & exclusion criteria were enrolled in the study. Detailed history, physical examination, clinical photographs and investigations if required were recorded for all the patients.

Results: The prevalence oral mucosal lesions among dermatological patients is 1.04% with a female predilection and the mean age was 38.44 ± 17.30 . Majority of the patients belonged to the age group of 31-60 years. Established risk factors for developing oral lesions like tobacco and beetle nut use was found

in only 24% and 16% of the patients respectively. 21% of the patients were diabetic and the commonest oral lesions in them were oral candidiasis, mucosal vitiligo and leukoplakia 18% of the patients presented with only oral complaints, while 82% of patients came with skin complaints and their oral lesions were incidental findings. Out of 82 patients with dermatological diseases specific mucocutaneous diseases were seen in 44% of patients. Most common dermatological diseases seen were infections followed by vitiligo, lichen planus and pemphigus vulgaris. Majority of patients (91%) had single oral lesion and the commonest among them were oral candidiasis followed by mucosal vitiligo, lichen planus, aphthous ulcers and vesiculo bullous disorders.

Conclusion: There is enough evidence that oral cavity can provide early and sometimes the only clues to diagnosing certain systemic diseases. Many oral diseases with potential to turn malignant can be caught early if the clinician takes a few minutes to examine the oral cavity in all patients that he attends to.