# ORAL MEDICINE, DIAGNOSIS AND RADIOLOGY 

Dr. NIDHI YADAV
M.D.S (ORAL MEDICINE DIAGNOSIS AND

RADIOLOGY)

## ORAL CAVITY IS A MIRROR THAT REFLECTS AND UNRAVELS MANY OF THE HUMAN BODY'S INTERNAL SECRETS!!!

Oral medicine is a specialized discipline within dentistry that focuses on provision of dental care for medically complex patients $\& \in$ diagnosis and management of medical disorders involving the jaws $\&$ salivary glands

## WHEN TO CONSULT A ORAL MEDICINE SPECIALIST??

- Children or adults having single/multiple, persistent/recurrent, ulcers/vesicles/bullae in any part of mouth (cheeks, lips, palate, gums, tongue, pharynx)
- Lumps or swellings in any part of mouth
- Burning sensation in mouth on having normal/spicy food
- Sudden or gradually reduced mouth opening causing difficulty in eating food
- Rough appearance in any part of mouth
- Red/white/mixed, patch/patches in any part of mouth
- Stomatitis and cheilitis
- Persistent redness or soreness of gingiva or gums
- Non healing ulcer in mouth
- Diabetes mellitus patients having oral complaints
- Reduced saliva in mouth or feeling of dryness in mouth
- Chronic oro-facial pain and burning mouth syndrome
- Pain in temporomandibular joint
- Oral lesions or complaints in patients who have undergone chemotherapy/radiotherapy
- Oral lesions of systemic diseases


## WHY TO CONSULT EARLY??

- The symptoms like ulcerations, burning sensation, redness, reduced mouth opening etc are seen in some premalignant/precancerous diseases of oral cavity. Early diagnosis and treatment of these diseases is important.
- Ulcerative, vesicular and bullous lesions
> Oral manifestations of Herpes simplex virus infection, Varicella zoster virus infection, cytomegalovirus infection, necrotizing ulcerative gingivitis, erythema multiforme and its types, recurrent apthous stomatitis, oral hypersensitivity reactions, pemphigus vulgaris, bullous pemphigoid, Mucous membrane pemphigoid.


## CLINICAL PRESENTATION:



RECURRENT APTHOUS ULCER


HERPETIFORM ULCERS

Single or multiple, Small or large, oral ulcers that may be associated with burning sensation, itching, difficulty in swallowing and speaking. Nidhi Yadav


## RECURRENT HERPES LABIALIS

Lesions or ulcers on lips or corner of lips associated with itching and burning sensation.

- Red and white lesions of oral mucosa
> Oral candidiasis and its variants, oral leukoplakia and erythroplakia, oral submucous fibrosis, oral lichen planus, lichenoid reactions, symptomatic form of BMG, smokers palate.
- Most red and white lesions fall in the category of premalignant cases hence early diagnosis and treatment is mandatory for the patient. The etiology for red and white lesions is multifactorial as fungal infection, smoking and smokeless forms of tobacco, immunologic, heredity, allergic, hormonal,traumatic, drug induced etc.


Case images by Dr. Nidhi Yadav


BENIGN MIGRATORY GLOSSITIS


FOLIATE PAPILLITIS


TOBACCO POUCH KERATOSIS

Case images by Dr. Nidhi Yadav

## ORAL SUBMUCOUS FIBROSIS



REDUCED MOUTH OPENING


BLANCHED BUCCAL MUCOSA


SHRUNKEN UVULA Case images by Dr. Nidhi

## ORAL COMPLICATIONS OF NON SURGICAL CANCER THERAPIES

- Oral mucositis and pain
- Oral viral and fungal infections in cancer patients (oropharyngeal candidiasis
- Xerostomia

๑Dysphagia and dysgeusia


## TREATMENT

- Treatment options are mostly non surgical, and include medicinal and intralesional approaches.


## LIST OF ORAL MUCOSAL DISEASES THAT ARE DIAGNOSED AND TREATED BY ORAL MEDICINE SPECIALIST

- ORAL MANIFESTATIONS OF HERPES SIMPLEX VIRUS, VARICELLA ZOSTER VIRUS, CYTOMEGALOVIRUS, COXSACKIE VIRUS
- ERYTHEMA MULTIFORME, STEVEN JOHNSON SYNDROME
- RECURRENT APTHOUS STOMATITIS, BECHETS DISEASE
- MUCOCUTANEOUS DISEASES
- ORAL CANDIDIASIS
- ORAL LEUKOPLAKIA AND ERYTHROPLAKIA
- ORAL SUBMCOUS FIBROSIS
- ORAL LICHEN PLANUS AND ORAL LICHENOID REACTIONS
- ORAL LUPUS ERYTHEMATOSUS
- ORAL ALLERGIC REACTIONS
- LESIONS DUE TO SMOKELESS TOBACCO
- SMOKERS PALATE
- BENIGN MIGRATORY GLOSSITIS
- MUCOCELE
- NECROTISING SIALOMETAPLASIA
- CHEILITIS GLANDULARIS
- ACUTE AND CHRONIC ALLERGIC SIALADENITIS
- XEROSTOMIA AND SIALORRHOEA
- MYOFASCIAL PAIN DYSFUNCTION SYNDROME
- CHRONIC OROFACIAL PAIN


## THANK YOU

