## 11th Global Dermatologists Congress

November 14-15, 2016 Dubai, UAE

## Oral lichen planus: Current scenario

**S Anandan** Sri Ramachandra University, India

Oral lichen planus is a chronic inflammatory condition that affects the oral mucous membranes with a female predominance and peak presentation during fourth decade. Multidisciplinary approach is required for successful management of oral LP. T cell mediated auto immune process in which autocytotoxic CD8+ T cells trigger apoptosis of oral epithelial cells. Systemic drugs, contact allergens in dental materials, trauma, bacterial or viral infections may unmask the antigen. Up-regulation of heat shock protein (HSP) has been demonstrated. Increased secretion of Th1 type cytokines such as IL-2, IFN gamma and IL-12 leads to basal cell lysis. The causative factors are drugs, contact allergens, infections, stress and genetics. Oral lesions present as whitish lace like network, buccal mucosa is most frequently affected. The types of LP are: Reticular, papular, plaque, erosive and atrophic. The oral LP presents with pain and burning sensation. Diagnosis of oral LP includes clinical and histopathological criteria. Examination of skin, hair and nails is essential. Work up includes CBC, sugars, lipid profile, LFT, HCV screening, buccal smear for *Candida*, mucosal biopsy and direct immunofluorescence if necessary. Multidisciplinary approach involving dermatolgists, dentists and psychologists helps attain holistic management. Treatment of OLP includes topical steroids, cyclosporine, calcineurin inhibitors, retinoids in oral base & in difficult cases, systemic drugs like steroids, immunosuppressive agents, dapsone targeted phototherapy. Excision of resistant plaques and lesion showing atypia may be undertaken, treatment of oral LP aims at resolution of symptoms, lesions, reducing the risk of cancer and prolonging symptoms-free intervals to improve the QOL.

## Biography

S Anandan has completed his MBBS, MD and DD from Jawaharlal Institute of Postgraduate Medical Education and Research, India. He has worked as a Registrar for 2 years till 1986 and joined Sri Ramachandra Medical College in 1986 as an Assistant Professor and presently the Dean and Professor of Dermatology, SRMC & RI. He is the Fellow of AAD, Life Member of IADVL, Member of EADV and International Society of Dermatology. He is an Examiner in MD and DNB Dermatology for various universities in India. He has 9 international and 33 national publications to his credit and contributed chapters in text books of dermatology.

anandan\_subbu@yahoo.co.in

Notes: