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CLINICAL DIAGNOSIS AND CONSERVATIVE TREATMENT OF RETICULAR AND EROSIVE ORAL LICHEN PLANUS: CLINICAL CASE REPORT

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Abstract

Oral lichen planus is an autoimmune pathology with predilection between the fourth and sixth decades of life, for females and leukoderms. This pathogenesis is uncertain, but it may be related to chronic liver disease, stress, hormonal disorders, etc. Its main forms of presentation are: reticular and erosive. The aim of this article is to report the case of a patient with reticular and erosive lichen planus in the oral cavity whose history and clinical aspects were crucial for the diagnosis and treatment. This is a case report of a male, 60 years old, leucoderma, who sought care referring burning in the cheek and gum when drinking wine and using vinegar, had gone through several professionals and multiple treatments without diagnosis or improvement of symptoms. In medical history, liver disease and chronic thrombocytopenia were reported. On physical examination, atrophic jugal mucosa was noted, with areas of ulceration and bilateral erosion, with the presence of reticular aspect white striae, whitish plaques on the lingual dorsum and striated crustal areas in the upper lip mucosa. In the clinical setting, 0.05% clobetasol propionate was prescribed and additional tests were requested (complete blood count, blood glucose, VSG, folic acid, B12, serum iron, TSH and anti-HCV). After 14 days, complete remission of the lesions and painful symptomatology were observed; no noteworthy alterations were observed in the complementary exams. Thus, the patient will follow periodic follow-up and upon relapse will resume corticosteroid therapy, and in the event of new abnormal clinical findings, incisional biopsy will be indicated.

Author Keywords

Autoimmunity, Corticosteroids, Erosive Lichen Planus, Oral Mucosa, Reticular Lichen Planus

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