ORAL AND MAXILLOFACIAL MEDICINE

The Basis of Diagnosis and Treatment
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Preface to second edition

I am pleased to say that the first edition was very well received and proved popular. Indeed, the book was awarded the First Prize of the Royal Society of Medicine and Society of Authors, for a new authored book.

Nevertheless, I have taken the opportunity to restructure; to thoroughly revise and update the text; to reformat where this could enhance clarity; to add new material and clinical pictures and some basic histopathology, tables, boxes and algorithms; to add new chapters on sialorrhoea and drooling, other conditions, and adverse drug reactions; and to update Further Reading.

My additional thanks are to John Huw Evans for his technical assistance, to Dr Stefano Fedele for his comments overall, to Dr Mohamed El-Maaytah and Dr Navdeep Kumar for providing a few figures, to Professor John Eveson for kind permission to use histopathology from our book Eveson, J.W. and Scully C. Colour Atlas of Oral Pathology (1995). Mosby-Wolfe (London) and to Peter Reichart, David Sidransky and Dr L. Barner for permission to reproduce their WHO Classifications from Pathology and Genetics of Tumours of the Head and Neck (2005) and to Professor Mervyn Shear for commenting on the chapter on Odontogenic Cysts and Tumours.

The wise should consider that health is the greatest of human blessings.

Hippocrates

CS
2007
Oral medicine is that area of special competence in dentistry concerned mainly with diseases involving the oral and perioral structures, especially the oral mucosa, and the oral manifestations of systemic diseases. The specialty, in some countries termed ‘stomatology’, deals not only with oral disease but also with perioral lesions, and is increasingly known as ‘oral and maxillofacial medicine’. Furthermore, apart from the obvious close relationships with oral pathology (oral and maxillofacial pathology) and with oral surgery (oral and maxillofacial surgery), there is a close relationship with special care dentistry and hospital dentistry.

This book attempts to present for those interested in oral medicine and hospital dentistry, the basics of the specialty of oral medicine in a useful and digestible format; by offering the information in a range of modes and levels of detail and offering practical guidance to diagnosis, therapy and sources of information for patient and clinician, both on the Internet and elsewhere.

The first section reviews the fundamental principles of the history, examination and investigations and principles of management. In the absence of randomized controlled trials, many of the therapies suggested are unable to be thoroughly evidence based. Hopefully, future multicentre studies will rectify this deficiency. The second section discusses the more common symptoms and signs in oral medicine.

The third section covers in some detail the most common and important conditions seen in oral medicine. This section also includes synopses of a number of eponymous and other conditions relevant to oral medicine; if a specific condition is not found there, the reader is referred to the index, since it may well be located elsewhere in the book.

The fourth section is a discussion of the important areas of HIV infection and iatrogenic diseases.

The other relevant oral manifestations of systemic disorders are tabulated in Appendix 1: further detail can be found in Medical Problems in Dentistry (Scully and Cawson: Elsevier, Edinburgh, 2004).

Agents used in the treatment of patients with oral diseases are outlined in Appendix 2. Only a limited number of these are prescribed by dental practitioners, but practitioners may have to cope with questions from patients about their treatment, or to recognize or deal with treatment complications. Further details can be found in textbooks such as Basic Pharmacology and Clinical Drug Use in Dentistry (Cawson, Spector and Skelly: Churchill Livingstone, Edinburgh, 1995).

An attempt has been made to present the material in such a way as to highlight the more important conditions – important because of frequency or seriousness – and to guide the reader through didactic and problem-oriented approaches. However, it is impossible to position every subject in a perfect location, not least because few conditions affect only one site (e.g. even erythema migrans can have lesions in sites other than on the tongue), some affect even more than one tissue (e.g. ectodermal dysplasia affects skin, salivary glands and teeth) and several have a range of clinical presentations (e.g. lichen planus and cancer can both present with white, red or ulcerative lesions, and can be symptomless or cause extreme discomfort). Cross-referring between sections will help the user get full value from the content.

The book is not intended to give all the details of the various investigative and therapeutic modalities, since these are covered in other texts by the author, or in pharmacopoeias. The book offers illustrative examples of the more common and important conditions, but cannot provide the more comprehensive selection of illustrations such as can be found in atlases such as Oral Diseases (Scully, Flint, Porter and Moos: Dunitz, London, 2004).

I thank my patients and nurses who have taught me so much over the years, and continue so to do, and all those students and colleagues with whom I have worked and interacted, who may have shared the clinical care of some patients, and/or may have knowingly or otherwise contributed ideas or content. In this respect I thank especially Professors Oslei Almeida (Brazil), Jose-Vicente Sebastian-Bagan (Spain), Johann Beck-Managet (Austria), Roman Carlos (Guatemala), Marco Carrozzo (Italy), Roderick Cawson (UK), Pedro Diz Dios (Spain), Drore Eisen (USA), Joel Epstein (Canada), Sergio Gandolfo (Italy), George Laskaris (Greece), Jens Pindborg (Denmark; deceased), Stephen Porter (UK), Peter Reichart (Germany), Pierre-Luigi Sapelli (Italy), Sol ‘Bud’ Silverman (USA) and Isaac Van der Waal (The Netherlands).

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Oral Medicine – a major European forum; and to Dean Millard (USA) and David Mason (UK), who had the foresight to institute the World Workshops in Oral Medicine; to John Greenspan (USA) who had the foresight to organize the Oral AIDS workshops; and to Newell Johnson with whom I founded and co-edit Oral Diseases. These giants have helped the progression of oral medicine to the high level at which it now stands.

Much of my work could not be done without the support of my family (Zoe and Frances) and my work colleagues who help with information collection, particularly John Evans, Avril Gardner, Lesley Garlick and Karen Widdowson, to whom thanks are due. I thank Jose-Vicente Sebastian Bagan and Isaac van der Waal, and also my nephew, Dr Athanassios Kalantsis, for their helpful, friendly and constructive comments on the text.

Finally, I would be delighted to receive any comments about this text, in the hope that I can improve further in the future.

CS
London 2003
Intended outcomes

This text will deal with oral and maxillofacial diseases and their medical management, and it is intended that, having read this text, the reader will be able to:

- Adopt a systematic approach to medical history taking that extends routine questions into certain relevant areas of enquiry that involve the body in general.
- Examine patients and their oral lesions systematically and use the findings of specific features of the lesion and associated signs and symptoms, to start formulating differential diagnoses.
- Identify which sites may be affected by the presenting condition and what to look for at those sites.
- Identify relevant follow-up questions that may further clarify the findings of the clinical examination and refocus the history.
- Understand when clinical investigations are indicated, which are appropriate, and how to perform these investigations.
- Interpret the findings of routine clinical investigations (e.g. blood test results) and develop a sense of the potential implications for the patient.
- Recognize the scope of oral and maxillofacial diseases and the importance of medical management in addition to the traditional dental focus of the discipline.
- Advise the patient about the aetiology of oral lesions, and predisposing factors.
- Identify lesions and interpret the findings and develop a sense of the potential implications for the patient.
- Identify a range of therapeutic options for the patient and understand the need for regular review and reappraisal of the condition.
- Understand how treatment may impact, positively or negatively, upon the condition.
- Identify the need to refer for advice, investigations or treatment by dental, medical or surgical specialists.
- Recognize the importance of close liaison with colleagues in other disciplines, particularly medicine, pathology and surgery.