



MUCOSAL DISEASES (ORAL, ANOGENITAL), EXTERNAL EYE DISEASE

## DIAGNOSIS OF DERMATOLOGIC CONDITIONS AT THE ORAL MEDICINE MUNICIPAL SERVICE (1994-2017)

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**Background:** In the scope of the Stomatology/Oral Medicine, the diseases of the oral cavity are grouped in accordance with its etiology (infectious, inflammatory, pseudotumoral and neoplasms) or with its topography. In some dermatological illnesses, the injuries in the oral mucosa can precede the cutaneous manifestations, while in others they occur simultaneously and its recognition facilitates the diagnosis and treatment of many diseases. Careful examination of the oral mucosa can disclose related oral manifestations of cutaneous and systemic illness.

**Objective:** Demonstrate the incidence of the main oral manifestations of the dermatological conditions attended at the Stomatology/Oral Medicine Service of the Municipal Hospital of Petrópolis (HMNSE), Rio de Janeiro, Brazil; in the period between 1994 and 2017.

**Patients and methods:** All the individuals examined in the period between January/1994 and December/2017 were included in this study. These patients had been submitted to extra and intra oral physical examination and when indicated, collection of material for cytology and/or histopathology, was performed.

**Results:** We examined 4.251 patients (62% female and 38% male gender) and observed 5.167 pathological conditions. In the group of dermatological illness, 483 disorders (9%) had been found. The more expressive results were: oral lichen planus in 197 cases (41%); bullous disorders in 70 cases (14,5%), these subdivided in – pemphigus vulgaris in 33 cases (7%), pemphigoid in 20 cases (4%) and angina bullosa haemorrhagica in 17 cases (3,5%); hyperpigmentation of the oral mucosa in 53 cases (11%); exfoliative cheilitis in 37 cases (7,5%); EM/SJS in 27 cases (5,5%); syndromic diseases in 16 cases (3%) and lupus erythematosus in 12 cases (2,5%).

**Conclusions:** We observed a high incidence of diseases on the oral cavity of possible diagnosis and treatment by the dermatologist. We conclude that the examination of oral and paraoral structures can frequently, lead to a prompt diagnosis of cutaneous or systemic





conditions, interfering in a decisive way with outcome of these diseases.

