

MUCOSAL DISEASES (ORAL, ANOGENITAL), EXTERNAL EYE DISEASE

BLACK HAIRY TONGUE CORRELATED WITH HORMONE THERAPY: A CASE REPORT

N Ntavari $^{(1)}$ - E Savvopoulou $^{(1)}$ - J Chondrodimou $^{(1)}$ - P Gidarokosta $^{(1)}$ - E Zafiriou $^{(1)}$ - A Roussaki-schulze $^{(1)}$

University General Hospital, Department Of Dermatology, Larissa, Greece (1)

Background: Black hairy tongue is a benign condition characterized by hypertrophy and elongation of filiform papillae on the tongue's surface, with brownish-black discoloration. It has been associated with numerous medications and other predisposing factors including: smoking, heavy coffee/tea drinking, poor oral hygiene, xerostomia, drugs (steroid, antibiotics, antipsychotics) and radiation therapy of the head and the neck.

Observation: A 37-year-old woman presented at the dermatological department of our hospital with typical clinical appearance of black hairy tongue and referred onset a week ago. She is a 10-year smoker with past medical history of inflammatory bowel disease, thyroiditis and multiple-surgically treated endometriosis, for which she began injectable triptorelin hormone therapy last month. Clinically there was a pigmented area, with a hair-like coating on the dorsum of the tongue. No pathology was detected from the rest of clinical examination and detailed laboratory testing. The patient was recommended meticulous oral hygiene, daily brushing with soft toothbrush and chlorhexidine solution as well as smoking cessation. The patient review, 20 days after the initial assessment, revealed clear improvement of the lesion. Emphasis was placed on oral hygiene, as instructed, and due to possible correlation with the onset of hormone therapy, gynecological follow-up was suggested.

Key message: Black hairy tongue is a rare, innocent clinical indication. However, it has been associated with diseases such as human immunodeficiency syndrome and various types of medications. It is therefore necessary to obtain a proper medical history and detailed clinical-laboratory assessment. The etiology up to date remains unclear, beyond the role of oral hygiene. Patient's education on prevention is probably the optimum approach.





