

EDİTÖRE MEKTUP / LETTER TO THE EDITOR

Varicose tongue

Variköz dili

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Dear Editor,

Tongue is a muscular organ in the oral cavity which aids in taste, cleansing and chewing action. Changes in the tongue can be used for the assessment of systemic illness of a human. Usually dorsal surface of the tongue is inspected and ventral surfaces is missed out. Hereby is a case report on caviar tongue in a 55 year old male patient.

A 55 year old man came to the department of oral medicine and radiology for regular check-up. Medical history and dental history were non-contributory. Patient was moderately built and nourished. There were no significant extra oral findings. On intra oral examination deposits were evident on the lingual aspects of the lower anterior teeth. Localised bleeding was appreciated on probing. On examination of the ventral aspect of the tongue, dilated tortuous purplish red vessels with bluish tinge were seen along the ventro lateral portions of the tongue (Figure 1). The mucosal surface of the lower portion of the tongue is extremely thin and translucent because of which submucosal vasculature could be appreciated, which resembled Caviar tongue/Varicose tongue. A provisional diagnosis of chronic marginal gingivitis was given and patient was referred to the department of periodontics for the needful.

The caviar lesion is a physiological change associated with degeneration of the sublingual veins. Sublingual varices are benign vascular dilatations, usually asymptomatic and affecting 10% of the population over the age of 40years.¹ It occurs at three sites: ventral surface of tongue along the

sublingual vein, floor of the mouth near ostia of the sublingual glands and along the lateral portions of the under surface of the tongue.² These are frequently observed by dentists. Bleeding from these varices is uncommon.³ Histologically they appear as dilated vein with no inflammatory changes. The endothelium is hypoplastic but the wall is thick and cellular.¹ Differential diagnosis given based on resemblances are hemangioma, Lymphangioma, Kaposi's sarcoma, melanoma or other conditions like Osler's syndrome, blue rubber bleb nevus syndrome.⁴ Sclerotherapy or surgery is advocated in single lesions and unusual locations like lips or buccal mucosae.⁵



Figure 1. Purplish red vessels with bluish tinge were seen along the Ventro lateral portions of the tongue.

At times appearances of the oral cavity can vary due normal physiologic mechanism, systemic changes or cancerous catastrophe. Identification of the lesion is usually by the dentists and it plays a major role in designing the accurate treatment plan. Health science is all about three corner stones- examination,

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diagnosis and treatment.

REFERENCES

1. Rogers RS, Bruce AJ. Tongue in clinical diagnosis. *J Eur Acad Dermatol Venereol.* 2004;18:254-9.
2. Bean WB. The caviar lesion under the tongue. *Trans Am Clin Climatol Assoc.* 1952;64:40-51.
3. Pemberton MN. Sublingual varices are not unusual. *BMJ.* 2006;333:202.
4. Viswanath V, Nair S, Chavan N, Torsekar R. Caviar tongue. *Indian J Dermatol Venereol Leprol.* 2011;77:78-9.
5. Correa PH, Nunes LC, Johann AC, Aguiar MC, Gomez RS, Mesquita RA. Prevalence of oral hemangioma, vascular malformation and varix in a Brazilian population. *Braz Oral Res.* 2007;21:40-5.