

## Dermscopy and Pigmented Lesions of Oral Cavity

### Dermskopi ve Oral Kavitenin Pigmente Lezyonları

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Dear Editor,

Pigmented lesions are relatively rare in the oral cavity. They represent a variety of entities ranging from racial pigmentation to manifestation of systemic illness (Addison's disease), to benign (hemangioma, lymphangioma, melanotic nevi) and malignant neoplasms (Kaposi's sarcoma, malignant melanoma, pigmented basal cell carcinoma).<sup>1</sup> Biopsy is usually avoided in vascular lesions like hemangioma, Kaposi's sarcoma etc. by general dentists owing to the risk of excessive bleeding due to the possibility of their association with a feeder vessel. A color Doppler ultrasonography is sometime required in order to rule out this association; otherwise sclerosing agents are used for diagnostic and therapeutic purposes.<sup>2</sup>

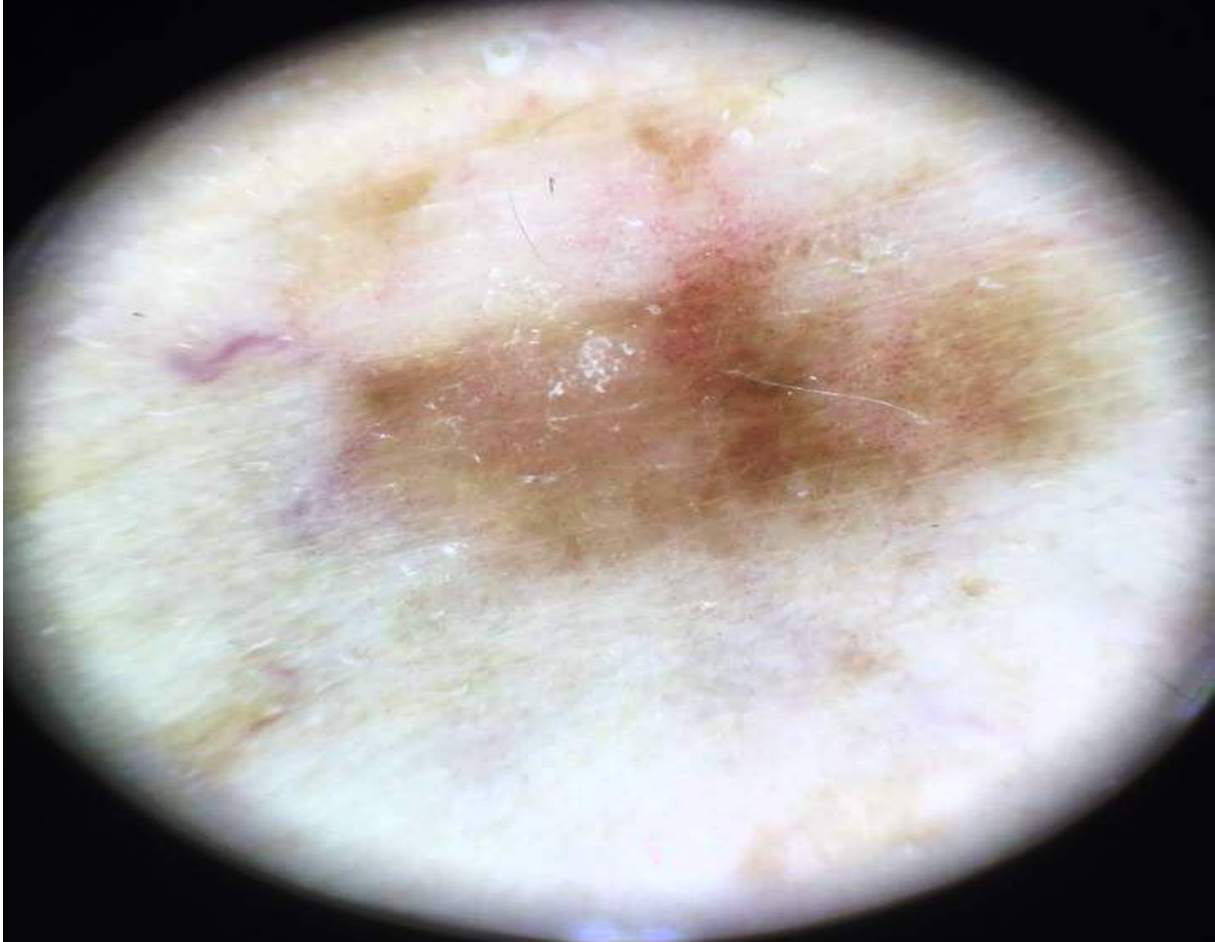
Melanotic lesions like malignant melanoma or melanotic nevi are sometimes seen in the oral cavity; some clinicians believe that incisional biopsy of a melanoma might disseminate the disease.<sup>3</sup>

A guideline of biopsy taking for melanoma has been issued. It includes a full thickness excisional biopsy allowing assessment of the Breslow thickness, but preliminary biopsies are only advisable in case of acral melanoma; however, shave and punch biopsy are no more recommended, but hesitation of clinicians for taking biopsy from pigmented lesions cannot be ignored.<sup>4</sup>

Dermscopy is a non – invasive technique that allows a visualization of morphological features of the lesion that are not visible to a naked eye. This is useful in dermatology for making an early differential diagnosis of different pigmented lesions.<sup>5</sup> Despite their popularity in dermatology, they are not very popular in investigation of the mucosal lesions of lip and oral cavity.<sup>6</sup> Dermscopy can be extremely helpful in making demarcation between melanotic nevi and malignant melanoma (Figure 1).

There is a need to intensify the research pertaining to the use of dermscopy in oral mucosal lesions, also a criterion has to be introduced for the diagnosis of oral pigmented lesions on dermscopy. It minimizes the risk of the exposure of the patient to excisional biopsy that may be resulting in facial disfigurement. This procedure can be easily adopted

by dentists working in private sectors and corporate sectors. Dental curriculum has to be enhanced with the use of dermoscopes in diagnosing pigmented oral lesions on graduate and post-graduate level.



**Figure 1.** Lentigo maligna melanoma of buccal mucosa under dermoscope (Note the dotted blood vessels and pigmentation)

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