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Helicobacter Pylori Infection of Lingual Dorsum. Risk of Gastric Infection Helicobacter Pylori

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1. Clinical Image

The role of Helicobacter pylori in the oral cavity has been researched/studied by our study group for the last 28 years. At that time, there wasn't a clinical entity that included Burning, Lingual Papillary Hypertrophy and Halitosis (BHH) together. However, the patients who presented this condition did not find an effective response to their demand. In some cases, a therapeutic diagnosis of Chronic Candidiasis was made in relation to Lingual Papillary Hypertrophy and they were referred to Periodontics Services for their Chronic Halitosis for evaluation and treatment. Many of these patients did not resolve their clinical symptoms, in their subsequent check-ups. The burning of the mouth was usually diagnosed as Burning Mouth Syndrome. A considerable percentage (60%) of these patients reported suffering from chronic gastric discomfort without receiving treatment, because when they consulted with the physician or with the gastroenterologist, their symptoms were associated with stress.

The patients with burning of the mouth were medicated with sedatives or anxiolytics that in a large percentage caused xerostomia with the consequent intensification of the painful symptoms due to the development of opportunistic Candida infections. All this discrepancies on the diagnosis of patients who consulted for BHH with chronic gastric discomfort made us think about the action of Helicobacter pylori on the tongue and the stomach. We have reported in 2001, 2005, 2014 the association of this bacterium with BHH. The diagnostic methods used were gastric and oral biopsy. The samples were evaluated by Giemsa technique and Molecular Biology with positive results. Early diagnosis is essential for the early treatment

and cure of these individuals with BHH in relation to Hp and its possible gastric compromise. Now a day's our line of research is based on the clinical, pathological, serological and molecular study of Sjogren's syndrome, the risk of infection by Helicobacter pylori and its association with MALT Lymphoma. We focus our research on the primary cellular and molecular events that promote the stages of lymphogenesis. In addition to the classic clinical, serological, and histopathological biomarkers for SS-associated lymphomas, we propose the study of novel molecular and genetic biomarkers and their validation. We consider it is necessary to lead to new developments in clinical research for the diagnosis of these conditions and to provide the opportunity for a specific therapeutic intervention, which will be especially relevant for the management of MALT lymphoma in the oral cavity and its relationship with gastric pathology.

The images show the clinical appearance of the lingual dorsum: hypertrophy of filiform papillae that is accentuated in the posterior sector, which have acquired a yellowish-brownish color. This is accompanied by burning and halitosis. Among the antecedents, it is worth highlighting the association with chronic gastric discomfort.

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Figure 1: The images show the clinical appearance of the lingual dorsum.