Current status on oral lichen planus (Olp) therapy

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Abstract

Lichen planus is a chronic inflammatory disorder of cutaneous and mucosal tissues that is estimated to affect 0.5–2.2% of the general population. Oral lichen planus (OLP) is considered to be an autoimmune disease of unknown aetiology in which epithelial cells are recognized as foreign due to changes in cell surface antigenicity. In contrast to cutaneous lichen planus, in which the clinical course is often mild and resolves within 2 years, mucosal OLP tends to follow a more chronic course and is often accompanied by acute exacerbations characterized by pain and burning sensations with considerable loss of quality of life. Patients with symptomatic OLP often require intensive therapy to reduce the signs and symptoms of this painful and disabling inflammatory disease. When pain and burning sensations are severe, therapeutic options include high-potency topical corticosteroids; systemic corticosteroids may be indicated in patients whose condition is unresponsive to topical corticosteroids. For such patients, other treatments include immunosuppressive drugs such as cyclosporine, tacrolimus, and retinoids. The aim of this study is to evaluate the alternative therapeutic strategies and their efficacy and tolerability in the treatment of OLP.

Biography:

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