

Interference of chronic graft-versus-host disease in oral health: a case report

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INTRODUCTION

Chronic graft-versus-host disease (cGVHD) is the main complication of allogeneic hematopoietic stem cell transplantation (HSCT). cGVHD is a multisystemic condition of variable clinical, and the skin and oral cavity are the most affected sites. Usually observed in the mucosa and tongue, the oral manifestations are characterized by erythema, lichenoid lesions and ulcers, besides that gingivitis, pain and xerostomia.



Photo 1 25/11/2014



Photo 2 28/05/2015



Photo 3 07/04/2016



Photo 4 28/09/2017

CASE REPORT

A 29-year-old male patient was diagnosed with a severe aplastic anemia, and he was submitted to allogeneic HSCT in October 2013. He developed systemic cGVHD and in the oral cavity from May 2014 and underwent by a basic periodontal therapy, oral hygiene orientation, application of 2% sodium fluoride under the tray, hydration of the oral and labial mucosa, and restorative treatment.

METHODOLOGY

In the pre-HSCT evaluation the patient presented the DMFT score was 6. It evolved with progressive hyposalivation, with cGVHD in the salivary gland. From 2014, he presented a good oral hygiene with a good control of bacterial plaque, however, there was an increase in caries incidence. After 5 years, a DMFT score was 30 and a poor plaque index control were observed, despite dental follow-up.

CONCLUSION

We observed that in addition to the oral hygiene protocol and clinical evaluation of the oral cavity with occasional dental treatment we were unable to control the evolution of the DMFT score. This clinical case illustrates the need for patient adherence to treatment and the relationship of hyposalivation with progressive worsening of the DMFT score.