



ORAL SUBMUCOUS FIBROSIS

LIBRARY DISSERTATION

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DR. SAVITA J K

DEPARTMENT OF ORAL PATHOLOGY
S.D.M. COLLEGE OF DENTAL SCIENCES &
HOSPITAL,
DHARWAD



T-00484



The oral mucous membrane is a unique area of the human body, which is continuously, exposed to various kinds of stresses such as heat, cold, microorganisms, chemicals and mechanical irritations.¹

In response to these stresses, both epithelial and connective tissue layers of the oral mucosa exhibit acute and chronic reactive changes. One such reaction of oral mucosa to areca nut is oral submucous fibrosis. Of all the collagen disorders affecting human, oral submucous fibrosis is of particular interest, as it is known premalignant condition.²

Oral submucous fibrosis is defined as an insidious chronic disease affecting any part of the oral cavity and sometimes the pharynx. Although occasionally preceded by and associated with juxta-epithelial inflammatory reaction followed by fibroelastic change of the lamina propria, with epithelial atrophy leading to stiffness of oral mucosa trismus and inability to eat.³

Oral submucous fibrosis has also been described as Atrophia idiopathica (tropica) mucosae oris, sclerosing stomatitis, and idiopathica palatal fibrosis, idiopathic scleroderma of the mouth and juxta epithelial fibrosis.³

The habit of betel quid chewing is highly prevalent in countries like India, Pakistan, Bangladesh, Burma and Taiwan, where in recent years it has become a major health concern.^{4, 5}

It is regarded that the areca nut alkaloids and tannins play an important rôle in etiology of Oral submucous fibrosis. Flavonoid components of areca nut have some