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Oral hairy leukoplakia and candidiasis in a HIV patient

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Clinical Images



Figure 1: Depapillated tongue and angular cheilitis



Figure 2: White lesion on right lateral border of tongue



Figure 3: White lesion on left lateral border of tongue

Description

A 34 year old female patient reported with complaint of pain in her left upper molar teeth since 6 months. Pain was intermittent, severe and aggravated on having food. Medical history revealed patient had recurrent fever since 6 months for which patient took medication from pharmacist and did not consult physician. Patient also gave history of reduced appetite and weight loss since 6 months. On extra oral examination there were no abnormality detected. On intraoral examination, there was deep caries with 28 and was tender on percussion. There was white lesion bilaterally on the commissures of lip that was non-scrapable (Figure 1). The tongue was depapillated and shiny. There was presence of non-scrapable white lesion along the right lateral border (Figure 2) and left lateral border of tongue (Figure 3) which appeared like vertical hyperkeratotic folds. Based on history and examination, provisional diagnosis of apical periodontitis with 28, oral hairy leukoplakia and angular cheilitis was given. Blood investigations revealed Hb- 8gm%, TLC- 2200/cumm, platelet count-90,000/cumm. Swab was taken from the corner of mouth that revealed presence of candidal hyphae. Patient was positive for HIV1 from trispot test and COMB AIDS test and CD4 count was 220cells/cumm. Patient was then referred to ART center for initiating antiretroviral therapy.

Manuscript Information: Received: November 05, 2018; Accepted: March 08, 2019; Published: March 15, 2019

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Citation: Patil P, Kabbur K, Nandimath K, Burde K. Oral hairy leukoplakia and candidiasis in a HIV patient. Open J Clin Med Case Rep. 2019; 1518.

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