



BENIGN MIGRATORY GLOSSITIS – A PEDIATRIC CASE REPORT

ENT

Dr Nisha Sharma Medical officer, DDUZH Shimla HP 171001.

Dr Ankur Sharma Medical officer, R H Bilaspur HP 174001.

Dr S Mayank Sharma Medical officer CHC Mashobra Shimla HP 171007.

ABSTRACT

Benign migratory glossitis is a benign condition of unknown etiology. Its other names include geographical tongue, erythema areata migrans, erythema migrans, geographic stomatitis, wandering rash of tongue. A 7 year old asymptomatic patient with geographical tongue reported here. The anxious mother counselled regarding the benign nature of disease and told that it had no association with infections and malignancy.

KEYWORDS

Benign Migratory Glossitis, Geographical tongue, Self limiting

Case Report

A 7year old male patient brought by his mother as outdoor patient in the department of otorhinolaryngology at district hospital Shimla in Himachal Pradesh. She told that her child has reddish white patches over his tongue with on and off onset. She had noticed these patches for the past two years. These patches had insidious onset, painless. There was no triggering factor. Her child had no other associated illness. Her child had no other skin condition. The child was playful and attained all his milestones as per his age. His general examination was normal. On local examination, there were reddish smooth areas on the lateral sides of tongue with slightly elevated white borders, non-tender. There was no signs of anemia and vitamin deficiencies. His blood tests were normal. His mother was assured about the benign nature of his illness.

DISCUSSION

Benign migratory glossitis is a benign condition characterized by the erythematous lesion with white or yellow edges on the tongue. These lesions are most commonly located on the dorsum or lateral border of the tongue.^{1,2} We found in our case the characteristics lesion on the lateral border of the tongue. These lesions are recurring lesions and more common in male than female child. Patient may present with asymptomatic lesions or with mild to moderate symptoms like pain, redness, burning sensation. There is no specific treatment for this illness. Only symptomatic treatment is given.^{3,4} Here we reported a 7 year old child with geographical tongue without any symptoms.

CONCLUSION

Benign migratory glossitis is a self limited benign illness. There is no specific treatment for this illness. Only symptomatic treatment is given if its cause is not found. Patient and their attendants should be counseled properly once the diagnosis is made.

Acknowledgment

we would like to thank the patient who had agreed to have her son's case reported.

Declaration of patient consent

We certify that we have obtained all appropriate patient consent form. In the form the patient's mother have consent for their images and other clinical information to be reported in the journal. The patient's mother understand that his name and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest

Nil

Geographic tongue is a benign recurrent condition of uncertain etiology affecting the tongue characterized by loss of epithelium especially filiform papillae giving a characteristic appearance. The clinical presentation may vary from asymptomatic to painful and burning ulceration. The condition is commonly seen in adults but few

cases are reported in children. A case of asymptomatic geographic tongue in three-year-old male child and literature review with new insight in aetiology is presented here. Management depends on the clinical condition and underlying aetiology

Geographic tongue is a benign lesion at the dorsum and margins of the tongue that sometimes causes pain and burning sensation. This lesion is characterized by an erythematous area with white or yellow folded edges. The predisposing factors of this lesion include heredity, allergies, psoriasis, stress, fissured tongue and consumption of some foods. The present study was conducted to investigate the prevalence of geographic tongue and its related factors among the 7-18 year-old students in Kermanshah, Iran. This descriptive cross-sectional study was carried out in three schools in Kermanshah using multi-stage random cluster sampling method. A total number of 3600 students were examined (1800 girls and 1800 boys). Demographic data and the results of examinations were recorded in a questionnaire. The factors affecting the incidence of geographic tongue were analyzed by the SPSS-20 software and the Chi-square test. The prevalence of geographic tongue was 7.86% (283 individuals). The incidence of this lesion was significantly higher in males than in females (p

Abstract Data sources PubMed, The Cochrane Library, Embase, Science Direct, Scopus, Web of Science and Google Scholar databases. Study selection English language studies reporting on treatment of symptomatic benign migratory glossitis (BMG) in children and adults were considered. Data extraction and synthesis Two reviewers independently selected studies with a single author extracting data subsequently verified by a second reviewer. A third reviewer was available to resolve discrepancies. A narrative summary of the findings was presented. Results Eleven studies involving a total of 150 patients contributed to the review. A majority (eight) were considered to be of very low quality, one of low quality, one of moderate quality and one of high quality. A range of treatments were employed, the most common being triamcinolone acetonide 0.1% (n = 2), topical tacrolimus 0.1% (n = 2), topical diphenhydramine (n = 2), and nutritional supplements (n = 2) Conclusions There is substantial heterogeneity in the available studies providing very low-quality evidence for the treatment of symptomatic benign migratory glossitis. Commentary Benign migratory glossitis (geographic tongue) as a

Objective The aim of this systematic review is to summarize the results of all published studies on symptomatic benign migratory glossitis and evaluate the best available treatment. Methods We searched the Cochrane Library, EMBASE, LILACS, PubMed, Scopus, and Web of Science for articles published up to September 2017, with no time restriction. We considered only articles published in English that evaluated the treatment of symptomatic benign migratory glossitis in children and adults. The protocol for this systematic review was registered at the international prospective register of systematic reviews (PROSPERO) as CRD42017074096. Results Of the 840 identified studies, 11 were included in our sample. Multiple treatment modalities were described for the treatment of symptomatic benign migratory glossitis. Conclusions There is a very low level of evidence for the treatment of symptomatic benign migratory glossitis, with

substantial methodological heterogeneity among the evaluated studies. In summary, we could identify no specific treatment for symptomatic benign migratory glossitis. Clinical relevance In clinical practice, at the outpatient clinic of oral medicine, we attend to many patients diagnosed with benign migratory glossitis, with varying intensity of pain ranging from mild to severe. Treating this disease is a formidable challenge for clinicians. Therefore, we performed a systematic review of benign migratory glossitis to identify the best evidence-based treatment available for this condition. We believe that this article may be useful in guiding clinicians on the choice of treatment. Keywords Benign migratory glossitis . Geographic tongue . Treatment . Exfoliatio areata linguae Introduction Benign migratory glossitis (BMG) is a pathological condition referred to in literature as geographic tongue, annulus migrans, erythema migrans, benign wandering glossitis, exfoliatio areata linguae, or transitory benign plaque of the tongue [1–3]. The lesion is an asymptomatic inflammatory disorder

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