



TO DETERMINE THE INFLUENCE OF STRESS, ANXIETY AND DEPRESSION IN PATIENTS OF ORAL LICHEN PLANUS

Dentistry

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ABSTRACT

Background: Oral lichen planus (OLP) lesions are chronic, rarely undergo spontaneous remission, it is potentially pre-malignant and often source of morbidity when erosive/ulcerative or erythematous lesions are present, suggesting that oral lichen planus does have an impact on quality life. It can be triggered by psychological or physical stress. **Aim:** Aim was to determine the influence of stress anxiety and depression in patients with OLP using, Depression, stress and anxiety scale 21 questionnaire (DASS21). **Methods:** 60 patients were enrolled into this study. Psychometric evaluation was done using DASS-21 questionnaire. Patients were asked to rate the extent to which they had experienced each symptom over the previous week on a four-point scale ranging between 0-4. Based on the score obtained, extent of a given negative emotion was classified as normal, mild, moderate, severe or extremely severe. It has 21 questions divided into three sub scales of seven items each to evaluate the effect of stress, anxiety and depression respectively among OLP patients. **Results:** The atrophic-erosive type showed highest stress levels ie 14.7%, while, 2.1% of the patients showed severe stress level in reticular type. (p-value of 0.005). **Conclusion:** OLP have periods of relapses and remissions. burning sensation were high, irrespective of the clinical pattern seen. We found that the levels of stress and anxiety were higher compared to depression in patients with oral lichen planus.

KEYWORDS

Anxiety, DASS21, Depression, Lichen Planus, Stress

INTRODUCTION

Oral lichen planus (OLP) is a chronic inflammatory condition affecting the oral mucosa, characterized by white striations, erythematous lesions, and painful erosions. Although its exact etiology is unknown, OLP is believed to be an immune-mediated disease influenced by genetic, environmental, and psychological factors.

AIM

This study assessed and demonstrated the correlation between the different parameters inducing stress levels in patients suffering from oral lichen planus. The questionnaire mentioned above has been previously used in separate studies—however, the present study aimed at establishing a co-relation among them.

MATERIAL AND METHODS

Twenty oral lichen planus patients and twenty normal subjects were included in the study. Every individual was given the hospital Anxiety and Depression Questionnaire,

Statistical Analysis

Student's t-test was used for comparing the means of the groups

RESULT

The atrophic-erosive type showed highest stress levels ie 14.7%, while, 2.1% of the patients showed severe stress level in reticular type. (p-value of 0.005) whereas severe levels of anxiety was seen in 11.4% with reticular type, 6.3% with atrophic-erosive type and combined type with 6.1%.

DISCUSSION

OLP is a fairly common disease of adulthood with a prevalence of 0.02 to 0.22%, as per recorded in 30,000 dental outpatients among Indians.⁴ Etiopathogenesis of OLP appears to be complex usually depends on genetic, environmental, and lifestyle factors where stress has been extensively well in psychiatry, various scales used where different categories reflecting an increased order are measured in terms of numbers like 0=Normal, 1=Slight, 2=Mild, 3=Moderate, 4=Severe. Each scale has its guideline on how to use, the rating system which generally evaluates the patient's behavior over a defined time.²

Research has shown that patients with OLP effectively suffer more anxiety and depression than control subjects and that anxiety may in turn, aggravate the clinical manifestations of disease. In addition to chronic discomfort that can result in stress, patients are concerned about the possibility of malignancy and lack of available patient educational material.

CONCLUSION

Stress, anxiety, and depression play a pivotal role in the onset and progression of oral lichen planus. These psychological factors not only exacerbate the disease but also impair the overall well-being of

patients. Comprehensive assessment and management of these conditions, alongside standard OLP treatments, can significantly enhance patient outcomes and quality of life. Future research should further explore the psychosomatic connections in OLP to develop targeted therapeutic strategies.

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