

Dealing with potentially premalignant oral epithelial lesions (PPOELs)

Hidayah Mohamed AbdulGhafar Elyas

Nahda College, Sudan



Abstract

Potentially premalignant oral epithelial lesions (PPOELs) are a group of diseases have the potential for malignant transformation, which should be diagnosed in the early stage. It was divided in to premalignant lesions and premalignant conditions until World Health Organization (WHO) has been changed this name in to oral potentially malignant disorders (OPMDs) in workshop held in 2005. Recently a new term potentially premalignant oral epithelial lesions (PPOELs) has been used as a broad term to define both histologic and clinical lesions that have malignant transformation ability. Oral leukoplakia, oral erythroplakia and oral submucous fibrosis are the most common premalignant lesion while oral lichen planus consider premalignant condition. These disorders mainly occur 5 years earlier than oral cancer. All Potentially premalignant oral epithelial lesions (PPOELs) will changed to Oral cancer if not treated early, but not all oral cancer proceeded by (PPOELs). The etiology is unknown, but there are Some risk factors such as tobacco and alcohol play an important role in development of these disorders. Unfortunately, oral premalignant disorders are usually misdiagnosed and mostly detected after malignant transformation. The diagnosis can be done by clinical history, clinical examination, and surgical biopsy. Many advanced diagnostic methods are used recently such as Fluorescence imaging, Optical spectroscopy, vital stainin, Photodynamic detection, Chemiluminescent kit, Brush biopsy/cytology, Confocal microscopy optical coherence tomography. Management of Potentially premalignant oral epithelial lesions (PPOELs) is a real challenging, up to date there is no a clear protocol and guideline for (PPOELs) treatment. The common method to manage (PPOELs) is observation after clinical examination. All patients have PPOELs who use one of the well-known risk factors should be undergo a comprehensive screening and any lesion not heal after removing the cause and take a treatment consider a malignant unless proven otherwise. The healing mainly occurs three months after cause removal, in some cases healing may takes about one year. Surgical resection, Laser ablation, Photodynamic therapy and Chemo-prevention all are new treatment modalities came in the field.

Biography

Hidayah Mohamed AbdulGhafar Elyas has completed her MSc at the age of 35 years from Riyadh Elm University, KSA. She is the Director of Oral Radiology Course, worked as Clinical Session Coordinator (CSC) and I was a judge in (Annual Research Day) Riyadh Elm University, KSA. She has over than nine researches as supervisor for the students some of them has been participated in conferences and published. Now Director of Oral Medicine, Oral Radiology and Education Development Center (EDC) member of Dentistry program, supervisor a three graduation researches in Nahda College, Khartoum State, Sudan.



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