Clinical picture

Hyperplastic oral candidiasis of the tongue

A 65-year-old man presented to our clinic with an asymptomatic, well demarcated, adherent white plaque on the posterior portion of the tongue. The lesion had appeared 1 year prior and had been increasing in size since then (Figure 1). We performed a punch biopsy that histopathologically confirmed our clinical diagnosis of chronic hyperplastic candidiasis (CHC) of the tongue. The lesion disappeared after antifungal therapy.

CHC is a variant of oral candidiasis that usually occurs in males on the inside surface of the cheeks, palate or tongue.1 CHC has been associated with a higher degree of immunodeficiency, dysplasia and malignancy.2

Clinically, it is nearly impossible to differentiate such lesions from a squamous cell carcinoma or a verrucous form of oral leukoplakia, except for the fact that they disappear after appropriate antifungal therapy.1–3 If the lesions are untreated, a significant proportion (~15%) may develop dysplasia and turn into cancer.1 In these cases, a biopsy is mandatory.

Photographs and text from: V. De Giorgi, M. Grazzini, S. Rossari, A.S. Longo, A. Gori, T. Oranges and D. Massi, Department of Dermatology, University of Florence, Florence, Italy. email: vincenzo.degiorgi@unifi.it

Figure 1. The tongue of the patient that presented an asymptomatic, well demarcated adherent white plaque.

Conflict of interest: None declared.

References