

False cheilitis (fausse cheilitis) as a clinical manifestation of oral secondary syphilis

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Resumen

Background: Syphilis is the oldest sexually transmitted infectious disease in humanity. In the last decades, it was noted the re-emergence of the disease, and actually it remains an important public health problem. Oral mucosa could be affected by the infection. Oral manifestations are commonly associated with secondary syphilis. It was described that the labial commissure could be involved as a split papule, also known as false cheilitis (FC). However, this clinical manifestation is poorly described in current literature. Aim: This brief report aims to determine the frequency of FC in patients diagnosed with secondary syphilis in our institution during the period 2009-2019. Material & Methods: A cross-sectional retrospective study was conducted using the medical records of the Oral Medicine Department, Facultad de Odontología, Universidad Nacional de Córdoba, Argentina. The cases included were patients with provisional diagnosis of secondary syphilis with oral manifestations, confirmed by laboratory tests. Collection of clinical and serological data was performed. Absolute and relative values were obtained. Results: In this study, 58 patients (26 males and 32 females) with an average age of 34.70 years old were included. The frequency of false cheilitis in these patients was 13% (8/58). All these patients with false cheilitis and secondary syphilis were young females with

an average age of 25.12 years old. These lesions presented as angular cheilitis with an unilateral pattern with painful fissured papules associated with other oral lesions such as fissures, intraoral papules, tongue depapillation, white or red plaques, and the evidence of submandibular lymphadenopathies when examining the head and neck region. Conclusion: Our findings suggest that when angular cheilitis presents in young females as a painful, unilateral lesion, in the clinical context of other lesions and lymphadenopathies in the head and neck region, it could represent a suspicious clinical sign of syphilis. Considering the global re-emergence of sexually transmitted diseases, dentists should be aware of the oral clinical manifestations of syphilis as they play a significant role in the early detection of these conditions.

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