Are Lichen Planus & Lichenoid Lesions Precursors to Oral Squamos Cell Carcinomas? - Dr. Riitta Seppänen-Kaijansinkko

Dr. O'Keefe: Oral lichen planus is a significant mucosal condition you're likely to see in your practice. Somewhere between 1% and 2% of the population are likely to develop the condition during your lifetime. That there is some controversy and unresolved debate on the malignant potential for lichen planus especially the erosive type; that's according to my oral pathology book published in 2009. So, when I saw a paper published in 2017 that said that a high percentage of oral cancer patients studied also had oral lichen planus I wanted to talk to one of the authors about the significance of this study. So, I'm happy to welcome today Dr. Riitta Seppänen-Kaijansinkko to talk to us about this paper published in 2017 and its significance for general dental practitioners.

Dr. O'Keefe: Riitta, could you tell us what was the nature of your inquiry? What were the key findings?

Dr. Seppänen-Kaijansinkko: Yes, we studied our oral squamous cell carcinoma patients during one year that were admitted to our hospital either for a follow-up or for the primary tumor. And surprisingly we found out that they had more oral lichen planus (OLP) and oral lichenoid lesions (OLL) in the history than we expected.

Dr. O'Keefe: So how many patients in total, what percentage had lichen planus or lichenoid lesions?

Dr. Seppänen-Kaijansinkko: We had 323 patients and 18% OLP and 4% had OLL in their history.

Dr. O'Keefe: Now, as I mentioned in my introduction, there's been quite a deal of controversy on the link between Lichen planus and carcinoma. Would you think that your findings are significant and actually could have to change the interpretation of the literature?

Dr. Seppänen-Kaijansinkko: Well, I think they are significant because these patients did not have the normal predisposing factors such as smoking and drinking and back teeth or oral hygiene and also, they had a better prognosis than the ones that did not have OLL or OLP in their history.

Dr. O'Keefe: Why do you think they have a better prognosis?

Dr. Seppänen-Kaijansinkko: I think that they were followed up because of their mucosal lesions and we called them when it was only T one and because other patients often come in when they, the tumor is bigger than T one
Dr. O'Keefe: Now there's about six different types of Lichen planus, and you'll probably correct me on that one. And, some of them are far more painful than others. Was there any correlation between the different types of lichen planus and the prevalence of squamos cell carcinoma?

Dr. Seppänen-Kajansinkko: Not really. In the literature, we have always been taught that the erosive type is the worst. But, we did not see a real significance between these groups.

Dr. O'Keefe: Right, okay. You found this new piece of knowledge sounds important to me. What do you think is the significance of it for me in general practice?

Dr. Seppänen-Kajansinkko: Well, I think it's important that you check the patient's oral mucosa every time they come for a checkup; so that means at least annually. And, if they have some kind of a lesion, you should always take a biopsy because without the biopsy you can't diagnose OLL or OLP. You have to have both clinical and histological signs of OLP. And then, once you see something, you should take the biopsy, either yourself or refer the patient to an oral surgeon who can take that. And based on the findings, you should follow them up month, at least annually.

Dr. O'Keefe: So, is the key takeaway message today as far as you're concerned that there is some sort of a link between lichen planus ad oral squamos cell carcinoma?

Dr. Seppänen-Kajansinkko: Well, these patients didn't have other predisposing factors. So, yes, I would say that there is a link. It's one of the predisposing factors for a squamous cell carcinoma, just like smoking and drinking and bad oral hygiene.

Dr. O'Keefe: Well, I'm sure that there's going to be further investigation in this and that the mystery surrounding the links between OLP and squamous cell carcinoma will continue to be unraveled. Thank you for your important work in this direction.