



0063

### Oral Potentially Malignant Disorders and Their Therapeutic Modalities

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**Objectives** The aim of this study was to investigate potentially malignant oral disorders, including leukoplakia, erythroplakia, oral lichen planus, oral candidiasis (mainly chronic), and actinic cheilitis, and their propensity for malignancy. The study aimed to explore novel techniques and treatments for managing these precancerous lesions and conditions.

**Methods** A comprehensive search for articles pertaining to the oral potentially malignant disorders and their therapeutic modalities was conducted for the review. The study was prepared according to PRISMA guidelines 2020. The literature search encompassed databases including PubMed, Web of Science, Medline, Google Scholar, and Elsevier's EMBASE. Over twenty-five articles were eligible for the study, dating from 2019 to 2024. Factors considered included website reputation, author expertise, information currency, alignment with reputable sources, and specific selection criteria.

**Results** Females predominated in leukoplakia (69.44%), erythroplakia (54.23%), and oral lichen planus (74.89%), while males were more prevalent in oral candidiasis (52.25%) and actinic cheilitis (62.99%). Therapeutic management, including corticosteroids and immunomodulatory agents, was common for oral lichen planus and candidiasis. Surgical interventions like excision, cryosurgery, and laser therapy were prevalent for leukoplakia, erythroplakia, and actinic cheilitis. The likelihood of malignancy varied: leukoplakia (7.27%), erythroplakia (91%), oral lichen planus (1.40%), oral candidiasis (18.35%), and actinic cheilitis (20%).

**Conclusions** The study identifies gender disparities in oral conditions, with females having higher prevalence in leukoplakia, erythroplakia, and oral lichen planus, possibly due to gender-specific susceptibility or hormonal influences. Conversely, males exhibited higher rates of oral candidiasis and actinic cheilitis, suggesting potential behavioral or biological factors. Treatment approaches varied, with medications favored for lichen planus and candidiasis, while surgical interventions were common for leukoplakia, erythroplakia, and actinic cheilitis. Further research is needed to understand the underlying mechanisms and clinical implications of these gender differences.