ALTERNATIVE METHOD FOR EPITHELIZING EROSIONS ON THE ORAL MUCOSA IN DIFFERENT DISEASES

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Three kinds of pathological changes can be seen on the oral mucosa: individual, accompanied by other internal and systemic diseases and lesions as a manifestation of many dermatoses (2,3). The purpose of this study is to establish the effect of gargle with analgetic, antiseptic, desodouring and erosion epithelizing action. However, we have immediately to remind that it is a pharmaceutical officinal form, no matter that it sounds quite archaic (1,4,5). The prescription of the solution which is extemporal and concentrated contains three cardinal components: hydrocortisone collyr ophthalmic, gentamycin, salol. Menthol or cloves oil with a vehiculum of absolute alcohol and several ml of distilled water is used for corrigens. In brief, medical formula is the following:

Rp/ Hydrocortisoni collyr ophthalmic (ex fl. N II)
Gentamycini 0.8 (ex amp)
Saloli 3.0
Olei Menthae gutts XXX
Sp. vini 96° 80.0
Aq. destillatae ad 100.0
Misce fiat solutio. D.S. 30 drops in 30 ml. water
for a gargle three times daily after meals.

A whitish emulsion is received which looks like the mouth and teeth water "Odol". Exttemporal preparation of solution gives the possibility to the clinician to increase or decrease the concentration of its main components according to the individual case. The solution for a gargle was used by 65 patients with dermatoses combined with oral changes (table 1). Relapses of the disease and anamnestic data for a preceding treatment with another drugs containing sulfonamides, dyes, borax and others or nothing at all were considered main criteria for patient selection. The six cases with herpetic gingivostomatitis are an exeption. The effect of the treatment was admitted by two indices: disappearing of the subjective complaints and duration of epithelizing. All these data are shown on table 1, too. The pains disappeared after the second day in patients with medicamenttoos stomatitis while in these with aphthae recidivantes an improve-
ment was stated later but in patients with pemphigus subjective complaints persisted more longer. Anamnestically, signs of therapeutic effect - pain and epithelization are significantly decreased in comparison with the preceding therapy. No one of the patients had any side effect. Having the properties not to stain and with pleasant taste, the solution was preferred even by the exacting patients.

Table 1. Distribution of patients treated with the gargle solution by nosological units and the effect of its use

<table>
<thead>
<tr>
<th>Nosological unit</th>
<th>n</th>
<th>Disappearance of the pain (in days)</th>
<th>Epithelization of the lesions (in days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Pemphigus vulgaris</td>
<td>13</td>
<td>10</td>
<td>7</td>
</tr>
<tr>
<td>Medicamentous stomatitis (Erythema fixum et multiforme)</td>
<td>35</td>
<td>4</td>
<td>6</td>
</tr>
<tr>
<td>Lichen erosivus (S-me Grinspan)</td>
<td>3</td>
<td>6</td>
<td>8</td>
</tr>
<tr>
<td>Aphthae vulgares recidivantes</td>
<td>8</td>
<td>4</td>
<td>4</td>
</tr>
<tr>
<td>Gingivo-stomatitis herpetica</td>
<td>6</td>
<td>5</td>
<td>4</td>
</tr>
</tbody>
</table>

In conclusion: 1. The solution for a gargle tested in 65 patients gives us the reason to characterize it like a means of choice for symptomatic treatment of dermatoses combined with erosive oral lesions. 2. We can divide its qualities in basic and secondary: a) epithelizing and anaesthetic action, b) refreshing and desodourous action of the oral cavity.