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Case Report

Pigmented Fungi Form Papilla of The Tongue - A Rare Entity

Neerja Puri1*

¹Department of Dermatology and Venereology, Punjab Health Systems Corporation, Ferozepur, Punjab, India

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2. Key words

Pigmented; papilla; fungi form; dorsum; examination; tongue.

1. Abstract

- **1.1. Case Report:** We describe a case report of 20 years old female with pigmentation over the dorsum of the tongue since childhood. Examination of the oral cavity showed pigmentation of fungi form papilla on lateral and dorsal aspect of tongue.
- **1.2. Discussion:** Fungi form papilla is a benign pigmentary condition of the tongue present on the tip, lateral aspect and dorsum of the tongue. It is a benign condition in which usually no treatment is required.
- **1.3. Conclusion:** It is important to know about this condition to avoid unnecessary investigations. It is rare and hence reported.

3. Introduction

Pigmented Fungi form Papilla of Tongue (PFPT) is a pigmented condition of the tongue [1, 2]. Very few textbooks of dermatology have described this condition. It is seen in Indians and some Asian races (especially Japanese), but is extremely rare in white population. There is no specific treatment of this condition and reassurance and counselling is the only option.

4. Case Report

We describe a case report of 20 years old female with pigmentation over the fungi form papillae on the dorsum of the tongue since childhood. According to the girl's mother, the condition was not present at birth and developed at 12 years of age. The systemic examination of the girl was normal. There was no abnormality detected on cutaneous examination. Examination of the oral cavity showed pigmentation of fungi form papilla on dorsal aspect of tongue (Figure 1). The pigmentation was present in a diffuse and symmetrical manner. The patient was asymptomatic with no other signs and symptoms. All the routine investigations of the patient were within normal limits. The patient was reassured of the benign nature of this condition and no treatment was given.

5. Discussion

In fungi form papilla of the tongue there are multiple projections



Figure 1: 20 years old female showing pigmentation of the dorsum of tongue

scattered on the tip, lateral or dorsal parts of the tongue containing taste buds. Most of the cases in the literature have been described in the Africans; hence the black population is more susceptible to it. Some cases have been reported in Asians especially Indians, but the standard textbooks of dermatology hardly mention it. The commonest age of presentation is in the second and third decade of life. Males are more commonly involved than females.

PFPT has been divided into three clinical types [3]. The first type is a well-circumscribed hyper pigmented area involving all the fungi form papillae on the anterolateral side or towards the tip of the tongue. The second type shows hyper pigmentation involving 3-7 fungi form papillae scattered on the dorsal surface of the tongue, and in the third type hyper pigmentation is seen on every fungi

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form papilla on the dorsum of the tongue. The histopathological features of PFPT show numerous macrophages in the lamina propria which stain positive for melanin with mason Fontana stain [4, 5]. The acquired nature of the lesions and the presence of melanophages suggests a transient period of inflammation, but the lack of inflammatory infiltrates is a histological marker of the condition. The pathogenesis of pigmented fungi form papillae is still unclear. Some authors have reported associations with some dermatological disorders such as linear circumflex ichthyosis and lichen planus, and an association with systemic diseases such as hemochromatosis, scleroderma, pernicious anemia, and iron deficiency anemia has also been described, although most patients are healthy [6]. Besides ethnicity, a case report has been done in which there were pigmented fungi form papilla in a mother and her daughter and this lends support to the idea that a genetic predisposition may be a contributing factor [7]. However, in one case associated with iron deficiency anemia, a moderate reduction in pigmentation was reported after treatment of the anemia [8].

Differential diagnosis include other causes of pigmentation of the oral mucosa such as hemochromatosis, pernicious anemia, amalgam tattoo, Peutz-Jeghers syndrome, Addison's disease, von Recklinghausen syndrome and melanocytic nevus [9,10,11].

6. Conclusion

The condition is seldom described in dermatology literature. Although, not rare in Africans and Asians, it is very rare in white races. It is important to identify this benign condition to avoid unnecessary investigations. Physicians should be aware of this benign condition to avoid any additional investigations.

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