

Localized Juvenile Spongiotic Gingival Hyperplasia (LJSGH)

Localized juvenile spongiotic gingival hyperplasia is a recently described benign condition with unknown etiology that affects the gingiva of children and young adults. Clinically LJSGH presents as a localized area (usually in the gums of the anterior maxillary region) of bright red, raised gingival overgrowth, it does not seem to be plaque-related, and though it might not be painful it might bleed easily.



Because this is a recently identified condition, and because the associated lesions do not necessarily improve/resolve with improved hygiene, previously early treatment recommendations included surgical excision of affected sections of gingiva. Surgery is no longer the preferred line of treatment with the lesions; there have been documented cases of recurrence, and surgery has the potential to cause permanent gingival defects.

To help determine a diagnosis, we first address suspected cases of LJSGH conservatively with careful, consistent and gentle at-home oral hygiene. If resolution does not occur, we can feel more confident in a diagnosis of LJSGH without performing a biopsy. In an attempt to be as conservative as possible, we can add to an improved oral hygiene regimen the treatment of these lesions with a topical corticosteroid (Triamcinolone 0.1% dental paste, also called Kenalog in Orabase). We now recommend to reserve surgical excision in the event that other, more conservative methods do not resolve the lesions or if the lesions become painful. If the lesions are asymptomatic and esthetic concerns are minimal, recommendations to avoid surgery until beyond early adulthood, thus giving the body time sufficient to self-remedy.

How to use Triamcinolone Dental Paste Note: It is to be used inside the mouth only.

- 1) Using a cotton swab, gently dry the lesion(s).
- 2) Using a cotton swab (or clean, dry finger) dab or press (do not rub) a small amount of paste onto the lesion until the paste sticks and a smooth, slippery film develops. Spreading or rubbing the paste will likely cause it to become crumbly, grainy, or gritty and will fail to adhere
- 3) Apply to the affected area multiple times daily, (we recommend 3-5 times daily (after meals and at bedtime)). Continue to apply until 2 days after resolution of the lesion. Do not use the paste longer than 14 days. The treated area should not be bandaged or otherwise covered or wrapped.

Mouth infections may worsen while you are using this medication. Inform the prescribing doctor or dentist if your condition persists or worsens after 7-14 days of treatment.