

Median rhomboid glossitis



Information for patients

Charles Clifford Dental Hospital

What is median rhomboid glossitis?

Median rhomboid glossitis is a yeast infection in the mouth caused by a type of fungus called Candida. Candida lives harmlessly in the mouth and normally causes no problems. However, under certain conditions, signs and symptoms can develop. The infection is not contagious, which means it cannot be passed on to others. Median rhomboid glossitis appears as a central, red, smooth or thickened patch on the top of the tongue.

Who gets median rhomboid glossitis?

Your chances of developing median rhomboid glossitis are greater if:

- You smoke
- You have longstanding dry mouth
- You wear dentures and particularly if you do not take your dentures out at night
- You are taking certain antibiotics, using inhaled or other forms of steroid, or if you are having chemotherapy
- You have low levels of iron, vitamin B12 or folate
- You have uncontrolled diabetes, or a weakened immune system, such as in HIV infection.
- You have a high sugar content diet

What are the signs and symptoms of median rhomboid glossitis?

Some people will have no symptoms and the condition may only be seen when your mouth is examined. Occasionally if you have median rhomboid glossitis you may notice the following symptoms:

- A red, smooth patch in the middle of the top part of your tongue
- A thick patch or lump in the middle of the top part of your tongue
- A sore mouth
- Red and/or white spots or patches in other parts of your mouth



How can I prevent median rhomboid glossitis?

If you take the following steps you may be able to prevent median rhomboid glossitis from developing:

- Stop smoking
- Maintain good oral and denture hygiene
- Regularly rinse the mouth with water after using steroid inhalers and use a spacer with the inhaler
- Keep good control of your diabetes

How is median rhomboid glossitis diagnosed?

Usually it is diagnosed by a dentist or doctor after hearing about the problems you may be experiencing in your mouth and after clinical examination. Additional tests may be used to confirm the level of Candida in the mouth, eg an oral rinse test. If you have an oral rinse test you will be asked to rinse your mouth with salty water and spit into a container. We will send this sample to a Microbiology laboratory where they will identify whether Candida is present, and, if so, what type it is.

Occasionally, if the diagnosis is unclear or the patch is thickened, we may need to take a biopsy of it. This means that a small sample of the affected area will be taken and viewed by a pathologist under a microscope to confirm the diagnosis.

How is median rhomboid glossitis treated?

It is treated by managing the cause of the infection. You will be given some medication to reduce the amount of Candida in your mouth. This medication could be a mouthwash called Nystatin which you will need to rinse around your mouth 4 times each day, usually for 2 weeks.

You could also be given a gel called Miconazole which should usually be applied 2-4 times daily for 2 weeks. Sometimes you may need a course of tablets such as Fluconazole but your doctor or specialist will advise you as to the most appropriate treatment.

It is important to follow the instructions on how to take your treatment and to complete the course of treatment even if your symptoms go away earlier. Corsodyl mouthwash (chlorhexidine gluconate) may also be prescribed as it has antifungal properties. Your doctor or specialist will advise you about this.

Some medicines used to treat your oral condition, particularly Miconazole and Fluconazole, can interfere with other medicines you may be taking, such as Warfarin. It is therefore important to tell your doctor and dentist about all the medicines you are currently taking.

Another source of information

- www.nhs.uk/conditions/Oral-thrush---adults/Pages/Introduction.aspx

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