

A Note on the Structure of Oral Mucosa

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Description

The oral mucosa is the lining of the mouth. It comprises the stratified squamous epithelium, termed "oral epithelium", and an underlying animal tissue termed lamina propria. Sometimes the mouth has been described as a mirror that reflects the health of the individual. The changes indicative of disease are seen as alterations within the oral mucosa lining of the mouth, which may reveal systemic conditions, like diabetes or vitamin deficiency, or the local effects of chronic tobacco or alcohol use. The oral mucosa tends to heal faster and with less scar formation compared to the skin. The underlying mechanism remains unknown, but also researchers suggest that extracellular vesicles could be involved counting on the region of the mouth; the epithelium could also be non-keratinized or keratinized. The non-keratinized squamous epithelium covers the taste bud, inner lips, inner cheeks, and therefore the floor of the mouth, and ventral surface of the tongue. The keratinized squamous epithelium is present within the gingiva and surface also as areas of the dorsal surface of the tongue.

The keratinization is the differentiation of keratinocytes within the stratum into non vital surface cells or squames to make the corneum. The cells terminally differentiate as they migrate to the surface from the stratum germinativum where the progenitor cells are located to the superficial surface. Unlike keratinized epithelium; non-keratinized epithelium normally has no superficial layers showing keratinization. The non-keratinized epithelium may, however, readily transform into a keratinizing type in response to frictional or chemical trauma, during which case it undergoes hyper-keratinisation. This alteration to hyper-keratinization commonly occurs on the usually non-keratinized buccal mucosa when the linear Alba forms, a white ridge of calloused tissue that extends horizontally at the extent where the maxillary and

of keratin is noted on the surface of the tissue, and therefore the tissue has all the layers of an ortho-keratinized tissue with its granular and keratin layers. In patients who have habits like clenching or grinding (bruxism) their teeth, a bigger area of the buccal mucosa than simply the linear Alba becomes hyper-keratinized. This larger white, rough, raised lesion must be recorded in order that changes could also be made within the dental treatment plan regarding the patient's para functional habits. The keratinized tissue can undergo further level of hyper-keratinization; a rise within the amount of keratin is produced as results of chronic physical trauma to the region. The changes like hyper-keratinization are reversible if the source of the injury is removed, but it takes time for the keratin to be shed or lost by the tissue. Thus, to see for malignant changes, a baseline biopsy and from microscopic study of any whitened tissue could also be indicated, especially if during a high-risk cancer category, such with a history of tobacco or alcohol use or are HPV positive. Hyper-keratinized tissue is

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