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IMAGE – OPEN ACCESS

Phenytoin-Induced Gingival Enlargement

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A 12 year-old male presented with complaints of generalized swollen gums associated with bleeding since 3 years (Fig. 1). His medical history revealed epilepsy since childhood, which was controlled with phenytoin 100 mg BID. Oral examination revealed poor hygiene with pale pink, enlarged, and firm gingiva that bled on probing. A diagnosis of generalized drug-induced gingival enlargement was made. The patient was treated with complete oral prophylaxis and substitution of phenytoin with gabapentin. He has been on regular follow-up for 4 months, and the gingival enlargement has been slowly reducing. Gingival enlargement is a well known consequence of the administration of certain anticonvulsants, immunosuppressants, and calcium channel blockers (1), and oral plaque, male gender, and young age are the known risk factors. The pathogenesis is unclear, but genetic predisposition, collagenase inactivation, and plaque-induced inflammation have been implicated in the etiology (2). Patients seek treatment due to decreased esthetics, gingival bleeding, or difficulty in speech or mastication. Treatment comprises changing the offending drug, plaque removal, and good oral hygiene maintenance; however, resistant cases may require gingival surgery (3).

Figure 1. Patient with gingival enlargement and poor oral hygiene

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