

COVID-19 and its Ramifications on Oral Health

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The coronavirus disease 2019 (COVID-19) is the newest respiratory contagious disease sweeping the globe rapidly [1]. The virus responsible for it is the severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2). The first case was discovered in Wuhan, China, in December 2019, the disease quickly spread around the world and on March 2020, the WHO has declared it a public health emergency of international concern (PHEIC) and a pandemic [2]. COVID-19 caused over 54 million confirmed cases and 1,324,249 deaths by 17 November 2020 [3].

The symptoms of COVID-19 mostly affect the elderly and are more severe if a co-morbidity is involved. It depends on the clinical stage of the infection how severe the symptoms are. Runny nose and nasal congestion, anosmia, dysgeusia or hypogeusia, diarrhea, nausea/vomiting, respiratory distress, fatigue, ocular symptoms, diarrhea, vomiting, and abdominal pain are some of the most common symptoms. Skin and mucosal lesions are often associated with these systemic conditions [4].

The oral manifestations of COVID-19, such as fungal infections, recurrent HSV, oral ulceration, drug-related eruptions, dysgeusia, xero-stomia or decreased salivary flow, and gingivitis, are likely related to the impaired immune system and/or susceptible mucous membrane and appear to be found more commonly in older, hospitalized patients with severe infections [5]. Many factors may contribute to this condition, such as immunosuppression, co-morbidities, poor oral hygiene, adverse reactions to drugs, stress, secondary hyper-inflammation responses, and iatrogenic trauma caused by intubation [6].

It is most likely correct that oral manifestations of COVID-19 are secondary to deteriorated systemic health or COVID 19 therapies. Several adverse reactions have been reported with drugs used to combat COVID-19, including oral manifestations [7].

"On legitimate grounds, the oral mucosal examination was overlooked during the Pandemic" Patients with suspected or proven SARS-CoV-2 infection should always have a routine intraoral examination, since it can indicate potentially life-threatening problems. Whether the currently emerging novel viral variations will have an impact on the oral symptoms is unknown. In the current uncertain environment, we believe that having a thorough understanding of all possible COVID-19 symptoms, including oral lesions, is critical. The fourth wave of COVID-19, as well as the worrying growth of the Delta strain, which is highly contagious and potentially fatal, keep the topic fresh in people's minds [8].

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