

minutes (685 nm, 3.0 J/cm<sup>2</sup>, W = 30 mW). The effect of laser light on fungal growth *in vivo* was evaluated after the final treatment using the swab method and semi-quantitative estimation of *Candida albicans* colonies growth on agar plates. The severity of inflammation was evaluated using clinical criteria.

After low level laser treatment reduction of yeast colonies in the agar plates occurred and palatal inflammation diminished.

LLLT is effective in treatment of denture stomatitis. Further placebo-controlled studies are in progress.

Key words: laser therapy, candida, denture stomatitis.

## Rak pločastih stanica usne šupljine nastao iz lezija oralnoga lichen planusa - prikaz dvaju slučajeva

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Rizik maligne transformacije oralnoga lichen planusa predmetom je mnogih rasprava i oprečnih stajališta u literaturi. Kronicitet oralnih lezija lichen nosi manji rizik za nastanak oralnoga karcinoma, a rizik za njegov nastanak veći je na već upaljenim, atrofičnim i erozivnim površinama oralnoga lichen. Procjenjuje se da OLP maligno alterira u 0,4 - 2,5% slučajeva, pretežito onih s već prije dokazanom lichenoidnom displazijom. Novije molekularno genetičke studije pokazuju minimalne genetičke promjene u lezijama oralnoga lichen, a veće su promjene zabilježene u epitelnoj displaziji i malignim lezijama.

Ovim radom želimo prikazati dva dobro dokumentirana slučaja oralnoga karcinoma koji se je razvio na bukalnoj sluznici u osoba s dugotrajnim oralnim lichenom.

Prikazani slučajevi dokumentiraju i upozoravaju na prirodnu sklonost oralnoga lichen planusa malignoj alteraciji i ističu nužnost redovitih biopsija: inicijalne biopsije kod prvoga pregleda radi postavljanja dijagnoze i češćih kontrolnih biopsija tijekom kliničkoga praćenja lezija kako bi se pravodobno otkrile promjene koje upozoravaju na displaziju. S obzirom na to da OLP predstavlja rizičnu leziju, potrebne su i genetičke raščlambe određenim markerima.

## Oral Squamous Cell Carcinoma (OSCCA) Arising from an Oral Lichen Planus Lesion - Report of Two Cases

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The risk of malignant transformation of oral lichen planus remains a controversial issue in the literature. Chronicity of oral lesions has been shown to present low risk of oral cancer which has been identified as arising from areas of erythematous atrophic and erosive lichen planus. It is estimated that malignant transformation of OLP occurs in 0.4 - 2.5% of cases, mostly those with lichenoid dysplasia. Recent molecular genetic studies showed minimal genetic deviation in lesions of oral lichen planus, while the epithelial dysplasia and malignant lesions have shown increased genetic alterations.

We report two well-documented cases of long-standing oral lichen planus in which squamous cell carcinoma of the buccal mucosa occurred.

Presented cases document and warn of the propensity of oral lichen planus to undergo malignant transformation and stresses the importance of regular histological follow-