

# Lingua plicata

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A 16-year-old boy presented with multiple fissures over the tongue along with foul smell since the last 6 months [Figure 1]. The patient was apparently healthy with no present or past history of any bad habits. On oral examination, the tongue was larger than normal with superficial and deep furrows branching off from the longitudinal furrow simulating the scrotal topography. The fissures developed slowly over the 6 months and, although asymptomatic, the patient was concerned with its appearance. Therefore, on the basis of clinical correlation, the diagnosis of lingua plicata was made.



**Figure 1:** Multiple fissures of variable depth and extending from a median groove

Lingua plicata (also known as scrotal tongue, fissured tongue, furrowed tongue, plicated tongue, cerebriform tongue, grooved tongue) is a benign condition. It is characterized by development of deep fissures on the dorsal as well as lateral surface of the tongue. Lingua plicata can be a heredity condition, with some evidence suggesting that this condition represents a polygenic trait or an autosomal-dominant trait with incomplete penetrance. Lingua plicata is usually seen in normal healthy individuals. The associated conditions with lingua plicata are geographic tongue, pustular psoriasis, Melkersson-Rosenthal syndrome, Sjögren syndrome, Down syndrome, pemphigus vegetans and chronic granulomatous disease.<sup>[1]</sup>

Lingua plicata is an incidental, asymptomatic harmless condition, but glossitis and halitosis may develop due to development of the bacterial and fungal colonies into the accumulated debris of food particles in the deep fissures.<sup>[1]</sup>

There is no definitive treatment for scrotal tongue. Avoiding tobacco, betel nut chewing, smoking, spicy and acidic foods are the other general measures. Good oral hygiene with a special tongue scraper may help prevent the complications.<sup>[2]</sup>

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**Cite this article as:** Avhad G, Jerajani HR. Lingua plicata. *Indian Dermatol Online J* 2014;5:361.

**Source of Support:** Nil, **Conflict of Interest:** Nil.

Access this article online

Website: [www.idoj.in](http://www.idoj.in)

DOI: 10.4103/2229-5178.137813

Quick Response Code:



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