Black hairy tongue (BHT), also known as lingua villosa nigra, is a rare but benign and painless condition. Its clinical expression is like a blackish carpet of the dorsal surface of the tongue (Figure 1), usually in the posterior two-thirds anterior to the circumvallate papillae [1]. Usually it does not affect the tip or the sides of the tongue, and it represents a particular form of a wider condition called hairy tongue, for which other colorations have been described (brown, yellow, and green) [2]. It is more common in adult patients but it has been described in pediatric patients [3]. BHT is usually asymptomatic and its principal associated problem is of aesthetic order. Sometimes patients may complain of nausea, halitosis, altered taste, tickling of the tongue [4].

Male sex, older age, poor oral hygiene, xerostomia, oxidizing mouthwashes, excessive black tea or coffee consumption, smoking or chewing tobacco, excessive alcohol intake, poor feeding, oral infections, status after a radiation therapy to the head and neck region, trigeminal neuralgia and drugs like steroids, antipsychotics, interferon [5], antibiotics as tetracycline and linezolid [3], are the predisposing factors for developing BHT. In these cases exists a lack of normal desquamation with accumulation of the keratin on the filiform papillae of the tongue with its hypertrophy and elongation [6].

Although the exact mechanism underlying oral hyperpigmentation is still unknown, it has postulated that increased local melanin production in patients treated with interferon [5]. Dietary consumption of herbal tea and sugars may lead to lowering pH on the dorsum of the tongue promoting chromogenic bacterial or yeast overgrowth [4].

The main differential diagnosis of BHT consists of some forms of acanthosis nigricans (which usually involves the lips), hairy oral leukoplakia (white lesions), Addison disease, Peutz-Jeghers syndrome, malignant melanoma, and black staining over normal tongue (bismuth, iron, food colorings) [7].

The first therapeutic action in BHT consists of eradicating predisposing factors. Infection associated black hairy tongue should be treated with antifungal [6] or oral antibiotic [1] based on microbiological results. Besides, therapy should include recommendations for meticulous oral hygiene. Mechanical removal of the hyperkeratotic papillae, by brushing or scraping with a soft toothbrush or tongue scraper, several times a day, can be very effective. Some medications such as retinoids, topical 30% urea solution and keratolytic agents can be efficiently used to treat BHT [4].

BHT is a benign and self-limiting disorder with an excellent prognosis and requires appropriate prevention, recognition and treatment [4].

References


Figure 1: Typical Black Hairy Tongue in an elderly patient.