

## OROFACIAL GRANULOMATOSIS (OFG)

*Please note this is our provisional diagnosis which must be confirmed by tests. If you have any questions, particularly about the treatment or potential side-effects, please ask Professor.*

- This is an uncommon condition
- The cause is unknown but it may be immunological
- Some patients have food or food additive intolerance to cinnamaldehyde, carnosine, monosodium glutamate, cocoa, carbone, or sunset yellow
- Similar conditions include granulomatous cheilitis, and Melkersson-Rosenthal syndrome
- OFG is not thought to be inherited
- It is not thought to be infectious
- It usually has no long-term consequences but related conditions such as Crohn's disease may affect the gut and other tissues
- Blood tests, X-rays, biopsy, allergy tests and other investigations are often required to exclude allergies, Crohn's disease and sarcoidosis
- OFG may be controlled by avoiding allergens, or by using medicines
- Useful websites <http://www.emedicine.com/derm/topic72.htm>  
<http://www.cicra.org/>

*A patient has the right under common law to give or withhold consent to medical examination of treatment. This is one of the basic principles of health care. Patients are entitled to receive sufficient information in a way they can understand about the proposed treatments, the possible alternatives and any substantial risk or risks which may be special in kind or magnitude or special to the patient, so that they can make a balanced judgement. (UK Health Dept. 19.2.99. HSC 1999/031)*

Professor Crispian Scully CBE  
Eastman Dental Institute for Oral Health Care Sciences  
and International Centres for Excellence in Dentistry  
University of London  
256, Gray's Inn Road  
London WC1X 8LD  
[www.eastman.ucl.ac.uk](http://www.eastman.ucl.ac.uk)  
February 2005