

CLINICAL GUIDE TO ORAL DISEASES

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Preface

The idea of writing this book was born one Sunday afternoon three years ago, when Professor Scully and I discussed some interesting and intriguing clinical cases for diagnosis. We thought it would be a good idea to provide various clinical photos, and respond to relevant questions in a way that the readers could be led to the proper diagnosis. Professor Scully wanted this new book to be reader-friendly and hoped to approach the common oral diseases in a different way. This book would not be compared to any of the other outstanding and well-written textbooks on oral medicine, as it would not be a complete review of oral diseases or rare syndromes.

This guide aims to present a large selection of clinical cases that are representative of the majority of oral common diseases that are seen in a daily clinical practice, and it is recommended to all physicians and oral health providers, including dental and medical undergraduate and postgraduate students, dentists and medical practitioners, especially dermatologists, as well as ear, nose and throat specialists, internists, and oncologists.

Despite Professor Scully's sudden death, the composition of the book writing took place as an effort to follow his idea. The book is designed to provide a short revision of oral medicine by using three different groups of multiple choice questions (MCQs) and answers based on clinical colored photos. Each group of questions has different degrees of difficulty in answering. The first group of questions is adequate for undergraduate students and is related to diagnosis; the second is addressed to medical and dental practitioners; while the last and more difficult is for postgraduate students.

This book is divided into three parts. The first part includes [Chapters 1-14](#) and refers to the classification of oral lesions by appearance and symptomatology; the second part comprises [Chapters 15-24](#) and encompasses the most common oral lesions by location; while the third part consists of [Chapters 25-27](#) and refers to the oral lesions that are normal variations, or have an age predilection, or are part of various clinical phenomena. Parts I and III are composed of 10 cases in each chapter, while the Part II has five cases in each chapter. Additionally, a concise table and a short text relevant to each chapter and containing a list of the common oral lesions/conditions is provided before cases presentation.

This book is based on more than 260 good quality, colored clinical photos, making this guide a brief practical atlas of common oral diseases. These clinical images come from my personal records, and I am deeply grateful to my patients who gave their permission, and to my publication team for plotting these images carefully. Their help was unique, and without it, this book would not be feasible.

Dimitris Malamos
Athens, 2020

Foreword

It is an honor and an immense satisfaction for me to provide the prologue for this book for two main reasons: the experience of its authors and the originality of this proposed editorial. When reviewing this “Clinical Guide to Oral Diseases”, one is surprised by the practical perspective with which its authors have imbued it, combining basic principles of problem-based learning with excellent images and an accurate and essential critical overview for arguing the differential diagnosis of each injury. Throughout the 27 chapters, the authors conduct an exhaustive review of the most common oral injuries based on the discussion of case studies. This approach perfectly combines Dimitris Malamos’ clinical experience and Crispian Scully’s academic rigor.

All of these features make this book a cross-sectional work, which can be useful both for undergraduate students, general dentists and specialists in the setting of medical-surgical dentistry. In the end, the success of the clinical activity is not based on academic titles but rather on the knowledge and expertise of the observer. In some manner, Professor Scully had already promulgated this idea during his final years, because he tended to end his emails with a phrase attributed to Goethe, “One only sees what one looks for. One only looks for what one knows.”

Pedro Diz Dios
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Finally, I am especially indebted to my wife Vasiliki and my children Panagiotis and Katerina for their continuous love and support for all those years of my involvement in Oral Medicine, and during the preparation of this guide.

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Section I