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# Treatment of oral mucosal neuromas with carbon dioxide laser



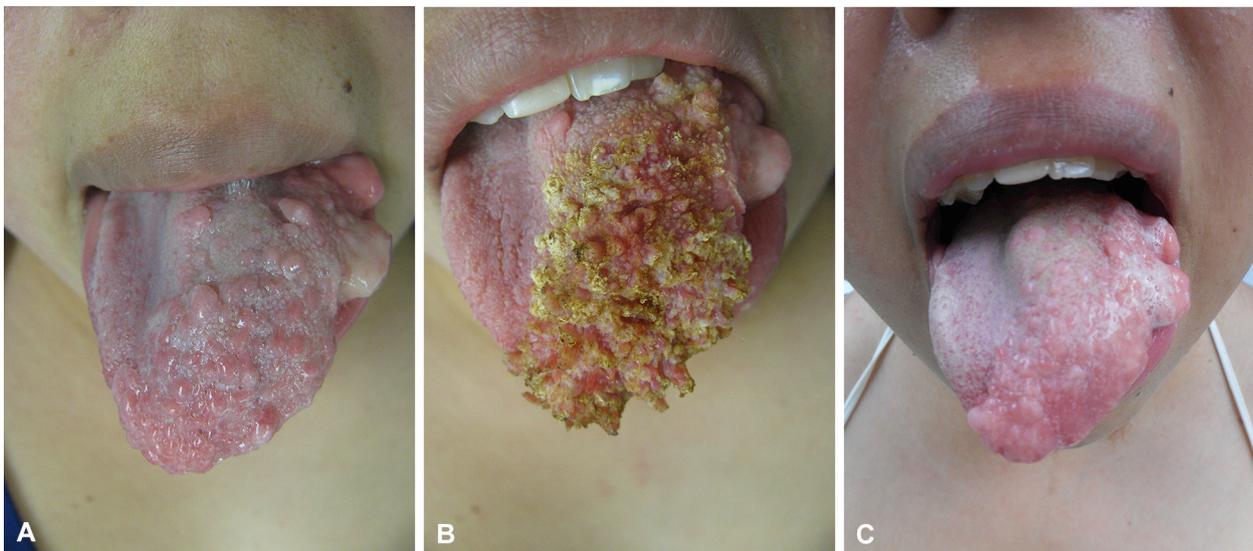
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## SURGICAL CHALLENGE

Symptomatic, functional, and aesthetic concerns of multiple oral mucosal neuromas prompt patients to seek treatment. The removal of multiple oral mucosal neuromas can be technically challenging and may require invasive surgical procedures, such as shave removal/debulking or excision.<sup>1</sup> Some patients desire or need a slightly less invasive and efficient approach that will still result in good cosmetic and functional outcomes. There is a need for an alternative therapeutic approach. Carbon dioxide lasers have been well established as a treatment modality for several types of other oral mucosal lesions, with improved control of hemostasis, reduced operative time, and excellent results.<sup>2</sup>

## SOLUTION

We treated multiple tongue mucosal neuromas (Fig 1, A) with a carbon dioxide laser. After obtaining informed consent, complete anesthesia was achieved with 1% lidocaine/1:100,000 epinephrine. The lesions were treated with a carbon dioxide laser (CO<sub>2</sub>RE laser; Syneron Candela, Wayland, MA) that was fully ablative, on a classic setting with treatment range of 1 to 3 mJ (8.8-26.3 J/cm<sup>2</sup>; Fig 1, B). The patient tolerated the procedure well. Acetaminophen with codeine was prescribed for postoperative pain control in addition to using



**Fig 1.** Tongue mucosal neuromas. Preoperatively (A), immediately after carbon dioxide laser treatment (B), and after 4 months of follow-up (C).

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a chlorhexidine 0.12% oral rinse twice daily for 2 weeks. An excellent cosmetic outcome was achieved at subsequent follow-up visits (Fig 1, C).

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