Calcium channel blocker-induced gingival overgrowth

Hiroki Matsuura, Takashi Fujiwara and Shiori Miyashita

Key words: Gingival overgrowth, Calcium channel blocker

A 69-year-old man was admitted to the hospital with bacterial pneumonia. He had previously been diagnosed with mild hypertension and treated with oral calcium channel blockers for six months. He denied any history of an allergy or exposure to radiation. An oral examination revealed a pale pink, plaque accumulation and gingival inflammation without pain or bleeding (Picture). Based on the clinical history and physical examination findings, the patient was diagnosed with calcium channel blocker-induced gingival overgrowth. Gingival overgrowth is an enlargement of the gum tissue caused by various factors, including inflammatory conditions, hereditary and metabolic disorders, and adverse drug reactions in patients treated with anticonvulsants, immunosuppressants, and calcium channel blockers (1). Despite the popularity and wide use of calcium channel blockers in the treatment of hypertension, this adverse drug reaction is rarely recognized (2). The most effective treatment for drug-induced gingival overgrowth is the withdrawal or substitution of the causative drug.

The authors state that they have no Conflict of Interest (COI).

References


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