

Black Hairy Tongue (*Lingua villosa nigra*)

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CASE

A 36-year-old otherwise healthy man came to the clinic complaining about bad breath, a tickling sensation on the tongue and altered taste buds. He had an excessive intake of alcohol (minimum 8 units daily), tobacco (40 cigarettes daily) and coffee (12 cups daily).

He presented with a history of 6 weeks with black discoloration of his tongue. He denied new medication or use of mouthwash containing hydrogen peroxide. His tongue was tested negative for pathogenic bacteria and fungal infections.

The patient had poor oral hygiene. He was diagnosed with "black hairy tongue" (BHT) and after minimizing his intake of alcohol, tobacco and coffee and brushing his teeth and tongue twice daily the condition resolved.

DISCUSSION

BHT occurs in about 0.5% of adults (1). However, the prevalence is variable depending on the population studied (2).

The distinct dark, furry appearance usually results from a build-up of dead skin cells on the many tiny papillae on the surface of the tongue containing taste buds. These papillae, which are longer than normal, can easily trap and be stained by bacteria, yeast, tobacco, food or other substances (2). The hairy tongue is often black, but can also appear brown, yellow, green and a variety of other colours.

Predisposing factors include excessive intake of alcohol and smoking, xerostomia (dry mouth), soft diet, poor oral hygiene and certain medications (2). Medications commonly associated with BHT are bismuth, antibiotics and medications that have xerostomia as a side-effect, for example antipsychotics (3).

Management is by improving oral hygiene, especially scraping or brushing the tongue (2). In addition, discontinuation of alcohol, smoking and a soft diet is advised (3).

Global variation in the prevalence of black hairy tongue occurs due to differences in diet, oral hygiene habits, and oral flora (3). The condition is more common in males and in the elderly. This may be associated with a higher smoking rate and poorer oral hygiene in these groups. Although more common in elderly the condition can occur in people of all ages, and the condition has even been reported in a 2-month-old infant (4).

Differential diagnosis includes pseudo-BHT secondary to chemicals or food colouring, pigmented fungiform papillae of the tongue, hairy leukoplakia, Addison disease, Peutz-Jeghers syndrome, Laugier-Hunziker syndrome, amalgam tattoo, lichen planus pigmentosus and congenital naevi.

BHT represents a relatively uncommon condition, causing great concerns in affected individuals, due to its clinical presentation. BHT is a benign condition, but people who are affected may be distressed at the appearance and possible halitosis and burning mouth, and therefore treatment is indicated (1).

The authors have no conflicts of interest to declare.



Fig. 1. Black hairy tongue before and after treatment.
Photo: Carsten Sauer Mikkelsen

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