

<p><b>Candidiasis (Topical)</b> Nystatin Oral Susp. 500,000u/5ml Disp: 280ml Rinse with 1 tsp Qid and spit out. Rinse for at least 3min. Do not eat or drink for 20 min. following use</p>	<p><b>Candidiasis (Denture)</b> Ketoconazol (Nizoral) cream 2% Disp: 15 gram tube Apply coat to inner surface of denture and to affected area after meals.</p> <p>Denture can be soaked in water with Clorox or in chlorhexidine but rinse very well.</p>
<p><b>Candidiasis</b> Clotrimazole (Mycelex) troches 10mg Disp: 70 troches Let 1 troche dissolve in mouth five times a day. Do not chew.</p> <p>In patients with xerostomia this does not work very well.</p>	<p><b>Lichen Planus/Lichenoid lesions</b> Determine if it is drug related, work with M.D to change drug Dexamethasone elixir 0.5mg/5cc Disp: 1 pint bottle (480ml) Use 1 tsp as mouthwash qid hold in mouth 2 min and expectorate. DO NOT SWALLOW. After meals and at bedtime.</p>
<p><b>Lichen Planus (Topical steroids)</b> From least potent to more potent</p> <ul style="list-style-type: none"> <li>• Triamcinolone Acetonide in orabase 0.1%</li> <li>• Fluocinonide (Lidex) gel 0.05%</li> <li>• Fluocinonide (Lidex) ointment 0.05%</li> <li>• Clobetasol propionate(Temovate) gel 0.05%</li> <li>• Clobetasol propionate (Temovate) oint. .05%</li> </ul> <p>Disp: 1tube (15gm) Coat lesion with a thin film after each meal and at bedtime. Once lesions heal apply every other night.</p>	<p><b>Erosive Lichen Planus</b> Determine if it really is ELP by biopsy. Start treatment with potent topical steroid. Fort treatment of gingival lesions use bleaching trays with extended flange to place ointment. Leave trays on for 15 min.</p> <p>Topical Tacrolimus (Protopic) For treatment of recalcitrant ELP. Protopic 0.03% or 0.1% Disp: 30gm tube Apply a thin layer of Protopic (Tacrolimus) Ointment to the affected area twice daily. The minimum amount should be rubbed in gently to control signs and symptoms. NOT FOR LONG TERM USE</p>
<p><b>Benign Mucous Membrane Pemphigoid</b> Diagnosis by biopsy Start treatment with Dexamethasone elixir and topical steroid in severe areas.</p>	<p><b>Benign Mucous Membrane Pemphigoid</b> Use of trays for gingival lesions. Patients usually have to use topical steroids for long term, it is safe and the patient gradually establishes his dose.</p>
<p><b>Herpes (Adults)</b> Valtrex 500mg caplets Disp: 40 caplets</p> <p>Take 2 caplets orally twice a day for ten days</p> <ul style="list-style-type: none"> <li>• <b>Start with prodromic sign or 5 days within onset of symptoms</b></li> </ul>	<p><b>Herpes Labialis</b></p> <p>Docosanol Cream 10% (ABREVA)</p> <p>Disp: 2 gram Tube</p> <p>Apply small dab 5 times a day</p>

Dr. Juliana Robledo D.D.S

UT Health San Antonio / Office: 210-567-4077/ Cell: 210-380-4733/email: robledo@uthscsa.edu