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## Role of physiotherapy in oral malignant melanoma: A review

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### Abstract

**Background & Introduction:** Oral melanoma is a decrepit, onward & perilous premalignant phase seen chiefly, in the Indians. It is often due to the fulfillment of tobacco. This is treated with remedy pursue by the use of exercise of the mouth stipulated by a physiotherapist.

**Methodology:** The originator directed an ambient search of open access articles of general scientific databases including PubMed, science direct, Scopus, Web of Science, shodhganga, Google Scholar etc. Two considerable scientific studies were found related to the physiotherapy in oral melanoma.

**Results:** Physiotherapy supervision includes exercises which have demonstrated to have a great efficacy on the oral melanoma protocol – like tongue stretch & “O” exercise.

**Conclusion:** Albeit the elementary care of oral melanoma is dental, the role of physiotherapy is also important greatly. Through the action of opening of the mouth is restrict, the application of physiotherapy has a prominent efficacy.

**Keywords:** exercise, oral malignant melanoma, physiotherapy

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### Introduction

- Cancer is the second-leading cause of death in the world. Approximately 70% of deaths from cancer occur in low-and middle-income countries. Cancer patients bear a significant burden of symptoms and side effects associated with the disease and its treatment.
- They suffer both mentally and physically. In response to the deterioration of the quality of life for the patients and their family, in 2002, WHO introduced the concept of Palliative Care and defined it as “the approach to improve the quality of life for the patients and their families who are facing life threatening illnesses through the assessment and treatment of pain and other physical, psychological and spiritual problems”.
- The Oral melanoma is a decrepit, onward & perilous premalignant phase seen chiefly, in the Indians. It is often due to tobacco consumption. This is treated with remedy pursue by the use of exercise of the mouth stipulated by a physiotherapist.
- Oral Submucous fibrosis as an insidious and chronic disease that affects any part of the oral cavity and, sometimes, the pharynx. Although sometimes preceded and / or accompanied by vesicle formation, it is still associated with inflammation of the juxta epithelium.
- Most important and potent cause for oral submucous fibrosis is the consumption of areca nut. The slaked lime releases alkaloids (arecoline, arecaine, guvacine, and guvacoline) from the areca nut, giving a feeling of euphoria and well-being in the person consumed.
- Physiotherapy along with pharmacology has shown good results in the treatment of oral sub-mucous fibrosis. Physiotherapy management includes excercises that have shown a significant impact on treatment of oral submucous fibrosis.
- Various exercises for oral sub mucous fibrosis patients - The various exercises which may be prescribed are:
  1. Tongue blade exercise
  2. Tongue-in-Cheek Push
  3. Side Tongue Stretch
  4. Cheek Puff
  5. Pucker
  6. "O" Exercise
  7. Lip Hold
  8. Up and Down Tongue elongate
  9. Teeth Sweep

**Tongue blade exercise:** Stick your tongue out straight. Press your tongue tip out against a flat wooden stick or tongue blade 2 or 3 times. Now press down on the stick while pushing the tip of the tongue against the stick. Hold this for 10 seconds. Put the stick against one side of your tongue. Push the side of your tongue against the stick while you push the stick in. Hold for 10 seconds. Repeat on the other side of your tongue. Place the stick on

top of your tongue tip. Press your tongue up against the stick as you push down on the stick. Hold for 10 seconds.

**Tongue-in-cheek push:** Push your tongue against the inside of your right cheek and move it up and down. Repeat this 10 times. Now do the same on the left cheek. Push your tongue against the inside of your right cheek. Put your finger on the outside of your cheek and push back against your tongue. Hold for 5 seconds. Now do the same on the left cheek.

**Side tongue stretch:** Stick your tongue out to the right side of your mouth. Stretch it to the right as far as you can for 10 seconds. Stick your tongue out the left side of your mouth. Elongate it to the left as far as you can and hold it for 10 seconds. Stick your tongue out and move it quickly from side to side, being sure to touch the corner of your mouth on each side each time.

**Cheek puff:** Take in a deep breath and puff your cheeks out. Hold the air in your cheeks by tightly closing your lips together. Hold the air in your cheeks for 5 seconds. Take in another deep breath and only hold air in your left cheek. Then switch and hold air only in your right cheek.

**Pucker:** Pucker your lips like you are going to give someone a kiss. Hold for 5 seconds. Pucker your lips and move your pucker from one side to the other. Do not move your tongue. Repeat this 10 times. Close your lips tightly and say "m, m, m", then "p, p, p", then "b, b, b". For more lip closure practice, say "me, , me, me", "pe, pe, pe", "be, be, be".

**"O" Exercise:** Start with your jaw wide open and hide your teeth under your lips. Purse your lips in an "O" shape. Repeat this 10 times.

**Lip hold:** Put a small flat stick or tongue blade between your lips. Press only with your lips and hold the stick straight out from your mouth. Hold the stick for 1 minute or as long as you can.

**Up and down tongue stretch:** Open your mouth and stick your tongue out and down toward your chin. Stretch your tongue down and hold for 10 seconds. Open your mouth and stick your tongue up toward your nose. Stretch your tongue up and hold for 10 seconds.

**Teeth sweep:** Touch the tip of your tongue to the biting surface of your upper front teeth. Slide your tongue tip along your tooth line to the far right and hold for 5 seconds. Then slide your tongue along your tooth line to the far left and hold for 5 seconds. Now repeat along the biting surfaces of your bottom teeth.

## Materials and Methods

**Study Design:** Narrative Study/Literature Review

**Source of Data:** Cochrane literacy, Google scholar, SCOPUS, academia, Shodhganga, PubMed, Research Gate & Academia.

## Results and Discussion

Physiotherapy supervision includes exercises which have demonstrated to have a great efficacy on oral melanoma protocol – like tongue elongation & “O” exercise.

Limited data availability, need more literature for evidence based practice.

## Conclusion

Although the primary care of oral submucous fibrosis is dental, the role of physiotherapy is important too. Since the action of opening of the mouth is restricted, the usage of physiotherapy has a significant impact. These simple exercises may be performed anywhere. However, if the fibrosis is extensive, it may be difficult to perform these exercises completely. Most importantly the habit of areca nut consumption needs to be reduced.

## Source of funding

None

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