Geographic Tongue

What is geographic tongue?

Geographic tongue (also known as benign migratory glossitis or erythema areata migrans) is a common benign condition that affects 1-2% of the population. This condition appears as a red, slightly bald area on the tongue that is surrounded by a yellowish-white line. This area may get larger and then smaller over a few days so that it appears to move on the tongue or “migrate”. Its change in shape and size gives it a “map-like” appearance, hence its name – “geographic tongue”. This often affects the top and sides of the tongue. In rare cases, the lips and or inner cheeks may also be affected. The areas may last for days, weeks or months, and then disappear for a while. Each patient is different. While this condition is usually painless, a burning sensation or sensitivity to certain foods may be noticed in some patients.

What causes geographic tongue?

No one knows what causes geographic tongue but we do know it is not infectious and you cannot spread it through kissing or sharing a drink. In some patients the condition has been associated with psoriasis, asthma, eczema, hay fever and food allergies.

How do we know it is geographic tongue?

Usually an experienced dental professional can diagnose geographic tongue just by the way it looks, its location and your description of it. In cases where your doctor is unsure, he/she may perform a biopsy which will almost always provide a definite diagnosis.

What can I expect over time? Can this become cancerous?

In general, geographic tongue may flare up if your body is stressed (such as if you catch the flu). You will notice more sensitivity at such times, especially if you eat acidic or spicy foods. Geographic tongue has never been shown to give rise to cancer. However, if you have a sore on your tongue that does not heal, you should see your doctor for further advice.

How do we treat it?

There is no cure for geographic tongue which is a chronic condition, just as there is no cure for a chronic skin condition such as psoriasis. There may be periods when it is more noticeable and periods when it is less noticeable, but you will always have this condition. In general, most patients find it is a nuisance when it flares up. However, if it bothers you, you may swish your mouth with a numbing agent (such as viscous lidocaine and/or Benadryl). Very rarely, a steroid mouth rinse is necessary if there is severe discomfort.