

Letter to the Editor: E-cadherin, laminin and collagen IV expression in the evolution from dysplasia to oral squamous cell carcinoma

Dear Editor,

I have read the paper entitled: "E-cadherin, laminin and collagen IV expression in the evolution from dysplasia to oral epidermoid carcinoma" by Santos-Garcia et al (1). It's an interesting study about a controversial issue in oral carcinogenesis, which I would like to comment.

First of all, I would suggest a change in the name "epidermoid carcinoma" for "squamous cell carcinoma" when talking about carcinomas derived from the oral mucosa. The term "epidermoid" should be used only when talking about epidermal neoplasias, which refer to skin. The carcinomas refer to as "carcinomas of head and neck" should be addressed as "squamous cell carcinomas" even if they are laryngeal, oesophageal or oral carcinomas. In the references of the paper (1) we could appreciate that the articles cited do not talk about "oral epidermoid carcinoma", they talk about "oral squamous cell carcinomas".

I would also like to make a consideration about an issue discussed in Material and Methods: "124 samples from patients with a macroscopic diagnosis of oral leukoplakia" and the article number 8 from the bibliography, from 1978, is referenced. Nowadays, the diagnosis of oral leukoplakia is clinicopathological, which implies both, the clinical and the histopathological confirmation (2). However, the most astounding is that from the 124 leukoplakias, 74 are histologically carcinomas and 9 are "ganglionic metastases". Truly it must be a mix up, because these diagnoses are incompatible.

References

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Dear Editor:

Encouraged by the constructive character comments that Dr. Aguirre Urizar makes in their letter with regard to the work "E-cadherin, laminin and collagen type IV expression in the evolution from dysplasia to oral squamous cell carcinoma" (1), we want to tinge several aspect to those he makes mention in his letter.

In the first place we highlight that when reading the article with attention he has seen the existence of a misprint in the material and methods section that says: "124 samples have been studied with diagnostic macroscopic of oral leukoplakias and it should say, leukoplakias and oral carcinomas, like it appears described, in the abstract of the article, material and methods section. The misprint can be attributed to the processed of the text in the sending to the Magazine.

In another section, in which he makes reference to that the leukoplakias diagnosis, as we know is clinical-pathologic. In the study those white lesions whose pathologic diagnostic has been informed as "in situ" carcinoma, micro-invasive carcinoma, etc. are excluded as diagnostic definitive of leukoplakia, moment in that clinical-pathologically like carcinomas are considered (2, 3). Besides leukoplakias, 64 samples of carcinomas of oral cavity have been studied and 9 metastatic nodules that we have obviously never considered leukoplakias.

Another aspect that we highlight in the letter is the terminological discussion of "epidermoid carcinoma" that makes reference to the cancers that are originated in any epithelium, as much epithelium of external lining as interior. The term "squamous cell carcinoma" is equivalent to the other one although it is usually more used in the Anglo-Saxon literature, referring as much to the tumours of the sphere ORL as to any other localization including the skin (4), therefore not should be limited the terminology depending on the anatomical localization of the tumour. Some authors consider both synonymous terms. The results that they obtain of bibliographical searches in Medline, using both terms are similar; being limited the use of one or another term to the environment where it is studied, as the Anglo-Saxon or French pathologic school. We would be able to reach a consensus the use of the term "head and neck squamous cell carcinoma", but it will cost years, efforts, studies and congresses to get it. The sad thing is that the use of a term or another should not distract in the transcendence of the investigation on the molecular biology of the oral cancer, where the discoveries that we can obtain in a future, for sure will make disappear some terminological frontiers.

Thanking your work, receive a cordial greeting.

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1. Santos-García A, Abad-Hernandez MM, Fonseca-Sanchez E, Julian-Gonzalez R, Galindo-Villardón P, Cruz-Hernandez JJ, Bullón-Sopelana A. E-cadherin, laminin and collagen IV expression in the evolution from dysplasia to oral squamous cell carcinoma. *Med Oral Patol Oral Cir Bucal*. 2006; 11:E100-5.
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