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# ASSESSMENT OF THE DIAGNOSTIC DELAY IN A PORTUGUESE POPULATION OF PATIENTS WITH BURNING MOUTH SYNDROME – A PRELIMINARY STUDY

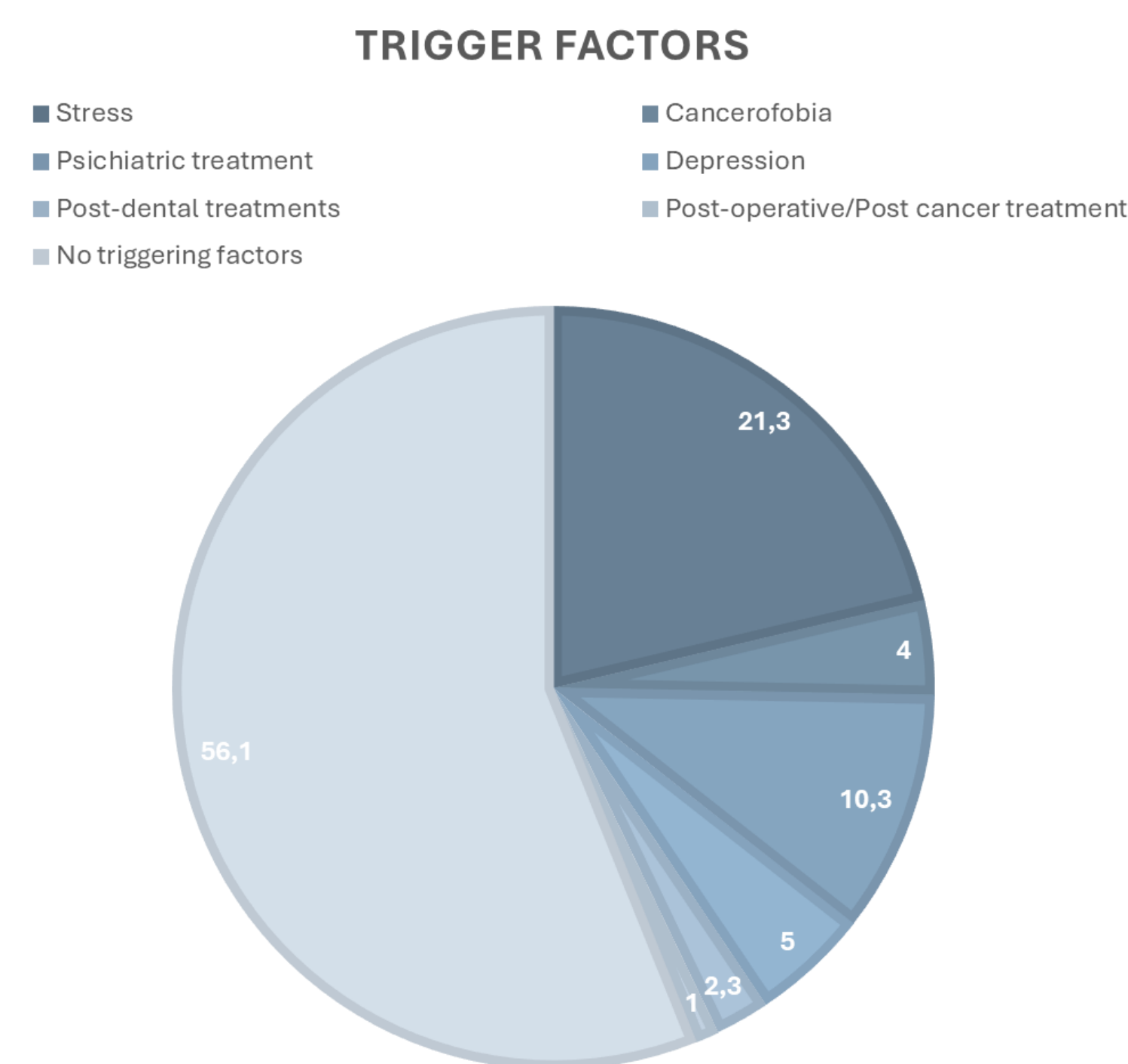
**Introduction:** Burning mouth syndrome (BMS) is a painful condition described as a persistent or recurrent burning sensation without any obvious systemic or oral pathologic manifestations.

**Aims:** This study, which is part of a broader doctoral research program, aims to assess diagnostic delay in patients with BMS, as well as triggers and contributing factors, including psychotropic drug intake —elements previously linked to the condition.

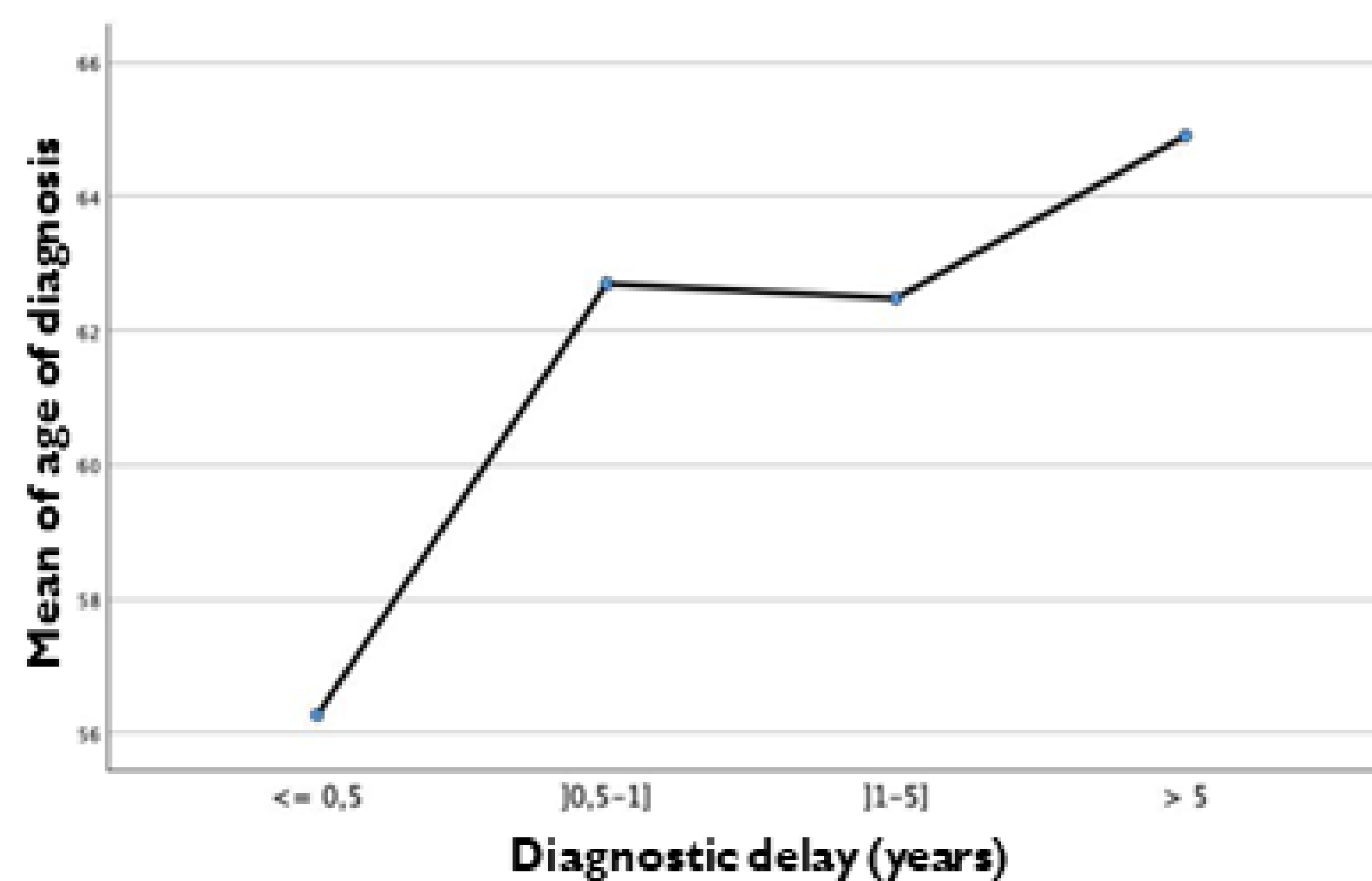
**Materials and Methods:** A total of 300 clinical records of patients diagnosed with BMS at the Integrated Oral Medicine Clinic (CIMO) in Lisbon were reviewed. Data collected included age, sex, diagnostic delay, patient-reported triggering factors, and psychotropic drug use. The dataset underwent both descriptive and inferential statistical analyses, with a significance level set at 5% ( $p < 0.05$ ) for the latter.

|                                  | Female | Male |
|----------------------------------|--------|------|
| Psychotropic drugs (%)           | 42,7   | 17,8 |
| Mean of age at diagnosis (years) | 60,3   | 56,6 |

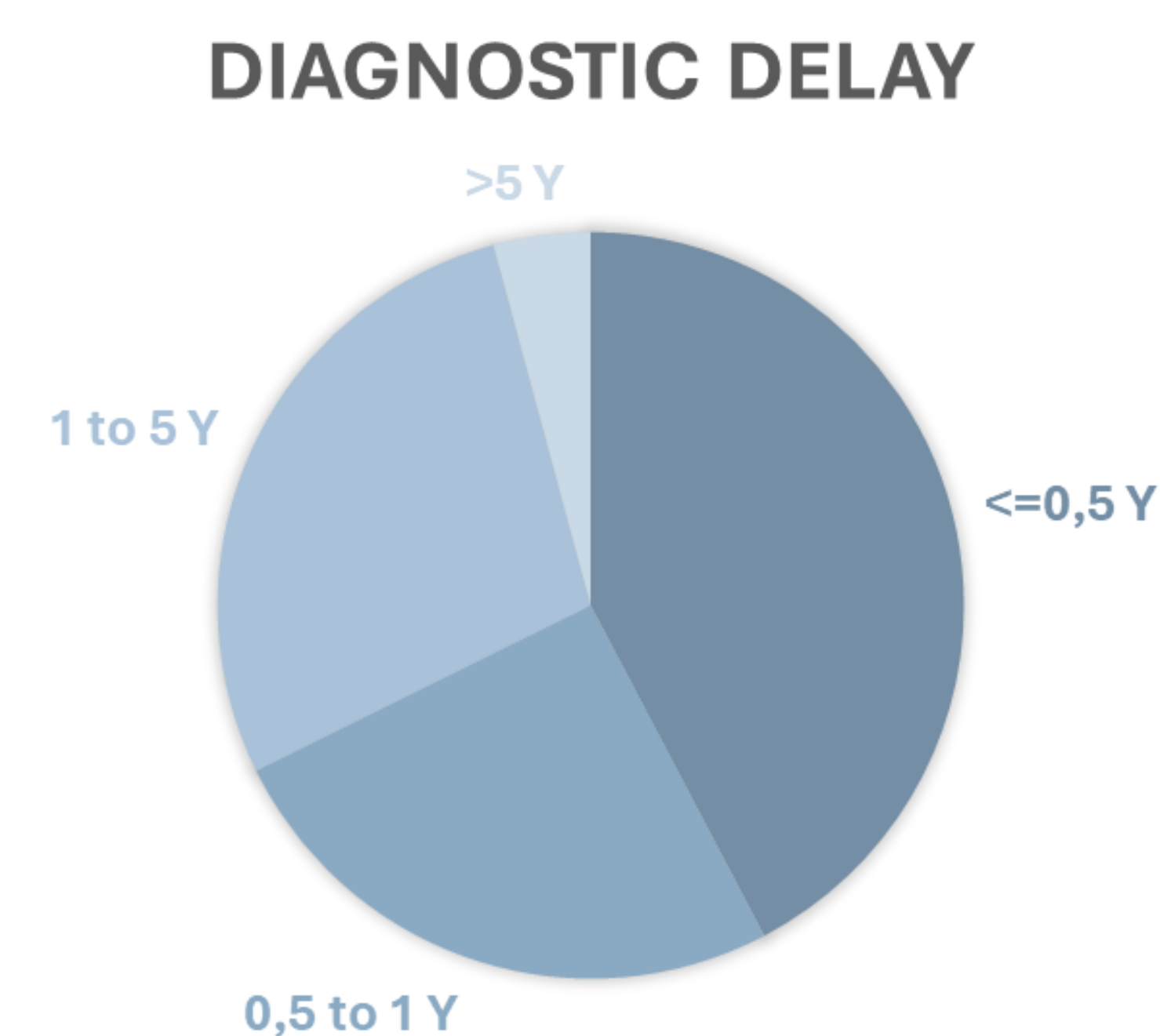
Table I: Comparison of psychotropic drug use ( $p < 0.05$ ) and mean age at diagnosis ( $p > 0.05$ ) in male and female.



Graph I: Predominance of different triggering factors in patients with BMS (%).



Graph II: Relationship between age at diagnosis and diagnostic delay ( $p < 0.05$ ).



Graph III: Diagnostic delay in patients with BMS (%).

**Results & Conclusions:** Among the 300 patients viewed, the majority were female (82.0%), and 33.7% were prescribed psychotropic medications. Psychotropic drug use was significantly higher among women (42.7%) compared to men (17.8%) ( $p = 0.002$ ) – Table I. Stress (Graph I) emerged as the most commonly reported triggering factor (21.3%). Although the mean age at diagnosis was higher in women (60.3 years) than in men (56.6 years) – Table I, this difference was not statistically significant ( $p = 0.075$ ). In contrast, a significant difference was found in the mean age at diagnosis between patients taking psychotropic drugs and those who were not: 62.9 versus 58.9 years ( $p = 0.009$ ). Age was also associated with diagnostic delay (Graph II), which was significantly shorter in patients diagnosed within 0.5 years ( $p = 0.021$ ).

Overall, age at diagnosis was significantly higher in patients using psychotropic medications, independent of sex. Additionally, younger patients experienced shorter diagnostic delays. These findings underscore the need for healthcare professionals—both physicians and dentists—to reduce diagnostic delays, with the aim of improving treatment outcomes, reducing patient disability, and enhancing quality of life.

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