

ISSN-0976-0245 (Print) • ISSN-0976-5506 (Electronic)

Volume 11

Number 03

March 2020



Indian Journal of Public Health Research & Development

An International Journal

Website:

www.ijphrd.com

Indian Journal of Public Health Research & Development

EXECUTIVE EDITOR

Prof. Vidya Surwade

Deptt. of Community Medicine, Dr Baba Saheb Ambedkar, Medical College & Hospital, Rohini, Delhi

INTERNATIONAL EDITORIAL ADVISORY BOARD

1. **Dr. Abdul Rashid Khan B. Md Jagar Din** (*Associate Professor*)
Department of Public Health Medicine, Penang Medical College, Penang, Malaysia
2. **Dr. V Kumar** (*Consulting Physician*)
Mount View Hospital, Las Vegas, USA
3. **Basheer A. Al-Sum**,
Botany and Microbiology Deptt, College of Science, King Saud University,
Riyadh, Saudi Arabia
4. **Dr. Ch Vijay Kumar** (*Associate Professor*)
Public Health and Community Medicine, University of Buraimi, Oman
5. **Dr. VMC Ramaswamy** (*Senior Lecturer*)
Department of Pathology, International Medical University, Bukit Jalil, Kuala Lumpur
6. **Kartavya J. Vyas** (*Clinical Researcher*)
Department of Deployment Health Research,
Naval Health Research Center, San Diego, CA (USA)
7. **Prof. PK Pokharel** (*Community Medicine*)
BP Koirala Institute of Health Sciences, Nepal

NATIONAL SCIENTIFIC COMMITTEE

1. **Dr. Anju D Ade** (Professor)
Community Medicine Department, SVIMS, Sri Padamavati Medical College, Tirupati, Andhra Pradesh.
2. **Dr. E. Venkata Rao** (*Associate Professor*) Community Medicine,
Institute of Medical Sciences & SUM Hospital, Bhubaneswar, Orissa.
3. **Dr. Amit K. Singh** (*Associate Professor*) Community Medicine,
VCSG Govt. Medical College, Srinagar – Garhwal, Uttarakhand
4. **Dr. R G Viveki** (*Associate Professor*) Community Medicine,
Belgaum Institute of Medical Sciences, Belgaum, Karnataka
5. **Dr. Santosh Kumar Mulage** (*Assistant Professor*)
Anatomy, Raichur Institute of Medical Sciences Raichur(RIMS), Karnataka
6. **Dr. Gouri Ku. Padhy** (*Associate Professor*) Community and Family
Medicine, All India Institute of Medical Sciences, Raipur
7. **Dr. Ritu Goyal** (*Associate Professor*)
Anaesthesia, Sarswathi Institute of Medical Sciences, Panchsheel Nagar
8. **Dr. Anand Kalaskar** (*Associate Professor*)
Microbiology, Prathima Institute of Medical Sciences, AP
9. **Dr. Md. Amirul Hassan** (*Associate Professor*)
Community Medicine, Government Medical College, Ambedkar Nagar, UP
10. **Dr. N. Girish** (*Associate Professor*) Microbiology, VIMS&RC, Bangalore
11. **Dr. BR Hungund** (*Associate Professor*) Pathology, JNMC, Belgaum.
12. **Dr Sartaj Ahmad**, PhD Medical Sociology, *Associate Professor*,
Swami Vivekananda Subharti University Meerut UP India
13. **Dr Sumeeta Soni** (*Associate Professor*)
Microbiology Department, B.J. Medical College, Ahmedabad, Gujarat, India

NATIONAL EDITORIAL ADVISORY BOARD

1. **Prof. Sushanta Kumar Mishra** (Community Medicine)
GSL Medical College – Rajahmundry, Karnataka
2. **Prof. D.K. Srivastava** (*Medical Biochemistry*)
Jamia Hamdard Medical College, New Delhi
3. **Prof. M Sriharibabu** (*General Medicine*) GSL Medical College, Rajahmundry, Andhra Pradesh
4. **Prof. Pankaj Datta** (*Principal & Prosthodontist*)
Indraprastha Dental College, Ghaziabad

NATIONAL EDITORIAL ADVISORY BOARD

5. **Prof. Samarendra Mahapatro** (*Pediatrician*)
Hi-Tech Medical College, Bhubaneswar, Orissa
6. **Dr. Abhiruchi Galhotra** (*Additional Professor*) Community and Family
Medicine, All India Institute of Medical Sciences, Raipur
7. **Prof. Deepti Pruthvi** (*Pathologist*) SS Institute of Medical Sciences &
Research Center, Davangere, Karnataka
8. **Prof. G S Meena** (*Director Professor*)
Maulana Azad Medical College, New Delhi
9. **Prof. Pradeep Khanna** (*Community Medicine*)
Post Graduate Institute of Medical Sciences, Rohtak, Haryana
10. **Dr. Sunil Mehra** (*Paediatrician & Executive Director*)
MAMTA Health Institute of Mother & Child, New Delhi
11. **Dr Shailendra Handu**, *Associate Professor*, Phrma, DM (Pharma, PGI Chandigarh)
12. **Dr. A.C. Dhariwal**: *Directorate* of National Vector Borne Disease
Control Programme, Dte. DGHS, Ministry of Health Services, Govt. of India, Delhi

Print-ISSN: 0976-0245-Electronic-ISSN: 0976-5506, Frequency: Quarterly
(Four issues per volume)

Indian Journal of Public Health Research & Development is a double blind peer reviewed international journal. It deals with all aspects of Public Health including Community Medicine, Public Health, Epidemiology, Occupational Health, Environmental Hazards, Clinical Research, and Public Health Laws and covers all medical specialties concerned with research and development for the masses. The journal strongly encourages reports of research carried out within Indian continent and South East Asia.

The journal has been assigned International Standards Serial Number (ISSN) and is indexed with Index Copernicus (Poland). It is also brought to notice that the journal is being covered by many international databases. The journal is covered by EBSCO (USA), Embase, EMCare. The journal is now part of DST, CSIR, and UGC consortia.

Website : www.ijphrd.com

©All right reserved. The views and opinions expressed are of the authors and not of the Indian Journal of Public Health Research & Development. The journal does not guarantee directly or indirectly the quality or efficacy of any product or service featured in the advertisement in the journal, which are purely commercial.

Editor

Dr. R.K. Sharma
Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)

Printed, published and owned by

Dr. R.K. Sharma
Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)

Published at

Institute of Medico-legal Publications
Logix Office Tower, Unit No. 1704, Logix City Centre Mall,
Sector- 32, Noida - 201 301 (Uttar Pradesh)



Indian Journal of Public Health Research & Development

www.ijphrd.com

Contents

Volume 11, March 03

March 2020

1. Development and Validation of a Questionnaire on Eating Behaviour for School Children and its Correlation with Nutritional Status.....1
A. Ayesha Fathima, T.H. Hema, A.J. Hemamalini
2. Occupational Varicella outbreak at a Tertiary Care Hospital: An Insight.....7
Abhisek Mishra, C.M. Singh, Binod Ku Pati, Barkha Rani Beck, Hari Krishnan Ashokan
3. An Exploratory Study To Identify Factors Affecting Non Compliance To Dots Therapy Among Tb Patients At Selected Dots Centre Vadodara13
Akash S. Patel, Miss. Varsha Hun, Mr. Adithya S.
4. Assessment of Cognitive Impairment among Elderly in the Selected Rural Community, Kancheepuram District, Tamil Nadu19
Akila K., Divya R., Preethianushya M., Aravindhan B., Rogina J.S. Savarimuthu
5. Safety and Tolerability of Two Different Formulations of Mycophenolate (Mycophenolate Mofetil and Mycophenolate Sodium) among Patient with Connective Tissue Disease Associated Interstitial Lung Disease (CTD-ILD) in a Tertiary Care Hospital.....22
Amrut Kumar Mohapatra, Pratima Singh
6. Assessment of Awareness of Parents on Importance of Dental Care in Pediatric Patients in Ethnic Tamil Population27
Anandhi D., R. Bharanidharan, Lekshmy Jayan, Ramya R., K. Rajkumar, R. Hemalatha
7. Study of Total Time Taken for OPD Billing Process in a Multi-Specialty Hospital32
Anil Pandit, Savita Prashar
8. Sleep Quality and Glycemic Control among Patients with Type II Diabetes Mellitus41
Anju Babu, Sabitha V Janardhanan, Sreevidhya R., Sruthy K.S.
9. A Comprehensive Break Even Analysis of MRI and CT Unit of a Tertiary Care Hospital in Sikkim.....47
Ankit Singh, Priya Ravi, Soniya Joseph
10. A Descriptive Survey on the Consumption of Sweetened Beverages and Contributing Factors among Adolescents in Selected PU Colleges at Mangaluru53
Anu Joseph, Anuja Susan Varughese, Archana P.S., Ashigha Anil Kumar E., Aswathi P., Athira Anto, Anju Ullas

274.	Short-term Survival of Stroke Patients According to Hemorrhagic and Ischemic Stroke Type in National Brain Center Hospital Jakarta	1474
	<i>Desvina Della, Helda</i>	
275.	Factors Affecting Nurse Performance in Medical Ward	1479
	<i>Desy Puspa Sari, Bayu Saputera, Muhammad Saleh, Qomariyatus Sholihah, Ibrahim Daud</i>	
276.	Maternal Death Model Decreases the Expression of BDNF in Rattus Norvegicus Newborns' Cerebrum and Cerebellum	1484
	<i>Duhita Dyah Apsari, Hermanto Tri Joewono, Widjiati</i>	
277.	Is it a Common Oral Lichen Planus or a Part of Grinspan's Syndrome?	1490
	<i>Dwi Ariani, Harum Sasanti, Taufan Bramantoro</i>	
278.	Effect of Chitosan on the Reproductive System of Female Rats (Rattus Norvegicus) Exposed to Lead Acetate	1495
	<i>Dwi Dianita Irawan, Annisa Wigati Rozifa, Alief Ayu Purwitasari, Umi Kalsum, Nurdiana Retty Ratnawati, Kenty Wantri Anita</i>	
279.	Physiological Response of Men Over 50 to Dosed Physical Activity: The Basis for Preventing the Development of Diseases of the Cardiovascular System	1501
	<i>Ekaterina Sergeevna Kachenkova Svetlana Yuryevna Zavalishina, Dmitry Mikhailovich Pravdov, Gennady Nikolaevich Germanov</i>	
280.	The Difference of Exposure Effect of the Mozart, Javanese, Sundanese and Balinese Gamelan Music During Pregnancy to the Number of Neuronal Cells on Cerebrum and Cerebellum of Offspring Rattus Norvegicus	1507
	<i>Elfrida Kusuma P, Hermanto Tri J, Widjiati</i>	
281.	Correlation the Components of Health Belief Model and the Intensity of Blood Tablets Consumption in Pre-Conception Mother	1512
	<i>Evita Kumala Dewi, Sri Umijati, Aditiawarman</i>	
282.	Factors Affecting the Survival of Antiretroviral (Arv) Therapy Patients in One of the Hospitals in Jakarta 2007-2017	1517
	<i>Fauziyah Hasani, Nuning Maria Kiptiyah, Mondastri Korib Sudaryo, Elisabeth SL Handayani</i>	
283.	Assessment of Medical Rehabilitation Patients on Service Convenience	1523
	<i>Husnul Khatimah, Stefanus Supriyanto</i>	
284.	Relationship Between Safety Promotion and Perception of the Use of Personal Protective Equipment (PPE) on Workers at Pt Aneka Gas Industri Region V East Java	1528
	<i>I Komang Indra Irmawan Hario Megatsari</i>	
285.	Correlation of Multidetector 64 Ct Pulmonary Angiography and Well's Clinical Score in Pulmonary Embolism	1534
	<i>Ibrahim E. Ali</i>	
286.	Functional Lapin-Human Simulation of Knee Joint Synovial Mucosal Cytokine Responses in Staphylococcus Aureus Septic Arthritis	1543
	<i>Ibrahim M S Shnawa, Aljanabi IAA, Almohana A, Busisi HA, Abiaes AA</i>	

Is it a Common Oral Lichen Planus or a Part of Grinspan's Syndrome?

Dwi Ariani¹, Harum Sasanti², Taufan Bramantoro³

¹Department of Oral Medicine, Faculty of Dentistry, Universitas Prof. Dr. Moestopo, Indonesia, ²Department of Oral Medicine, Faculty of Dentistry, Universitas Indonesia, Indonesia, ³Department of Public Health, Faculty of Dental Medicine, Universitas Airlangga, Indonesia

Abstract

Introduction: Grinspan's syndrome has triad of clinical symptoms: Oral Lichen Planus (OLP), diabetes mellitus, and hypertension. OLP is a disorder commonly found in oral mucosa. The symptoms and clinical features are often misdiagnosed which potentially harm the patients.

Discussion: A 74-year-old female had chief complaint of ulcers on the lower lip for 2 years. She had history of diabetes mellitus and hypertension for years. Previously, she went to dentist with an alleged herpes simplex virus infection and was treated with antiviral for a week but no improvement. The patient is diagnosed with erosive type OLP. Exploration was necessary to find out whether it was OLP or part of Grinspan Syndrome.

Conclusion: The diagnosis was Grinspan's Syndrome. Dentists must be familiar with medical management of hypertension and diabetes mellitus to take a role in the diagnosis and treatment of oral lesion with both of diseases in order to maintain optimum health.

Keywords: Grinspan's syndrome, oral lichen planus, diabetes mellitus, hypertension.

Introduction

Lichen Planus (LP) is a mucocutaneous disorder present in the chronic squamous epithelium that may affect the mucosal, genital, and skin, including scalp and nails. Oral Lichen Planus (OLP) is the most commonly found oral disease and often found in the buccal mucosa, tongue, palate, mole, gingiva, and lips. The clinical features of OLP have one or more of six classical appearances: reticular, erosive, atrophic, plaque, papulla, bullous. The erosive form has a symptom relation ranging from mild discomfort to pain or burning sensation, especially when consuming hot or spicy foods.¹⁻³ The diagnosis of

OLP is obtained from clinical examination and mucosal biopsy of the oral cavity if there is no doubt of a clinical diagnosis. The criteria used for histological diagnosis are abnormal keratinization, the presence of stratum granulosum, basal cell degeneration, and inflammatory cell infiltration, such as ribbons dominated by lymphocyte cells, which are present in connective tissue.⁴⁻⁹ Grinspan et al found an interesting association between OLP and diabetes mellitus (DM) and vascular hypertension which is then called Grinspan Syndrome.¹⁰⁻¹² This case report is unique because presenting rare case of Grinspan's Syndrome, especially in geriatric.

Case History: A 74-year-old female came with chief complaint of ulcers on lower lip for 2 years. History of fever was denied. A couple months ago patients went to Mecca to perform the pilgrimage. While being there, she could not eat regularly and drink enough. Ulcers on the lips progressively worsened until a week ago when she came to hospital. In the previous treatment, the patient's complaint was diagnosed from herpes simplex

Corresponding Author:

Dwi Ariani

Faculty of Dentistry, Universitas Prof. Dr. Moestopo,
Jakarta, Indonesia.

phone : (+6221) 73885254.

e-mail: dwiariani@dsn.moestopo.ac.id

virus infection. She had taken acyclovir for 2 weeks. Her lower lips feel drier, sometimes the brown liquid would come out from the wound. Communication with the patient was constrained by age, she had a limited hearing and memory disorientation. She also suffered from diabetes mellitus and hypertension for years. Blood pressure was 150/90 mmHg and she claimed for taking antihypertensive medication, such as 5 mg Amlodipine twice daily. The patient's blood glucose was above 300mg/dl, and she took Metformin twice daily before and Glimepiride after eating. Even though she regularly consumed drugs for hypertension and diabetes mellitus, blood pressure and blood sugar levels remained above normal. The patient used removable dentures in the upper and lower jaws for 5 years. Since the ulcers on her lips appeared, she felt uncomfortable using her dentures. She had less appetite and sleepless nights. On extra-oral examination, the lower lip border of the vermillion contained brown crust surrounded by erosive areas with white striae. On intraoral examination, there was atrophy and fissure in the dorsal portion of the tongue and all the teeth in the upper and lower jaws have disappeared. Laboratory results of blood tests obtained a rate of sedimentation of blood above the reference value and hemoglobin at the lower limit of the reference value. The possibility was iron deficiency anemia. From the results of clinical examination, the diagnosis of work suspected Lichen Planus Oral erosion type with systemic factors diabetes mellitus and hypertension was found. This case was about the Grinspan's Syndrome.

Management for erosive-type OLPs is by using topical corticosteroids on the red lip margin and the use of triamcinolone acetonide cream ointment 4 times daily on thin lips. Patients were administered with an iron-deficiency anemia by taking multivitamins containing folic acid and ferrous fumarate twice daily for 2 weeks and supportive therapy using Zinc, B, and E once daily. Communication, instruction, and education were emphasized in patients to consume foods high in iron, such as red meat, red beans, red fruits, such as beet, and vegetables. She was also advised to replace her dentures.

After a week of treatment, the patient came back for visit. Patients felt several improvements, especially on the bottom lip. After extra-oral examination, the wound and crust on the lower lip were healed with marked thin red areas on the lower lip, better hygiene of the mouth, and comfort in the mouth was increasing. She used triamcinolone acetonide cream ointment on her lower lip according to the doctor's instructions, and she felt

the lower lip was softer. She took vitamins according to each dose before breakfast and dinner. She continued to take diabetes and hypertension drugs according to the dose. In general, she felt better than last week and more comfortable when eating.



a



b

Figure 1. Lesions on the lower lip: (a) Before treatment: there was white erosive area and stria on the lower lip with a brown crusted coating; (b) After treatment: the erythema area of the lower lip, crust and erosion disappeared and the white striae fades.



a



b



a

Figure 2. Patient uses removable dentures: (a) Before treatment: erosive areas bordered red lips and lower labial mucosa; (b) After treatment: erythema of the lower lip was still out of the blood point.



a



b

Figure 3. Dorsum of the tongue has papillary atrophy and tongue fissure (a) Before treatment: erosive area of the posterior dorsum of the tongue; (b) After treatment: erosive area narrowly oval shaped surrounded by white edges.



b

Figure 4. Lateral of the right tongue (a) Before treatment: atrophic papilla tongue and erosive area surrounded by a thin white layer (b) After treatment: erosive area disappeared.



Figure 5. Denture hygiene was full of poor release.



Figure 6. Extraoral and fingernails after two weeks of treatment.

Discussion

Lichen planus is common in patients over 50, and more in women than men. With changes in daily diet, patients with OLP consumed too few fresh vegetables and fruits. Stress and emotions can be considered as contributing factors, especially in the exacerbation phase of OLP.^{5,13-16}

Patients with OLP lesions and using drugs related to reactions in the oral mucosa are also a possible implication of the drugs. The patients will experience symptoms described as Grinspan's Syndrome with a wide variety of drugs which now is known as oral

lichenoid reactions. The clinical picture will look like a phenomenon of drug reactions and is no longer referred to Grinspan's Syndrome.¹⁰ Clinical manifestations of OLP and medical history suggest that drug consumption may lead to lichenoid changes. It is important to note that the lichenoid response appears as an agent response that amplifies the presence of drug-induced abnormalities rather than the induction of a disease. Clinical response to OLP management is done such as by removing suspected drugs in amplifying OLP or by using topical steroids in OLP lesions.^{6,17-20} The main goal of OLP therapy is to reduce the symptoms of pain, remove oral lesions, reduce the risk of oral cancer, and maintain oral hygiene.²¹

Circumstances in the oral cavity reflect the health of the body and systemic diseases. Good dental and oral hygiene are partially dependent on the patients' mental health status. A state of stress, depression, and excessive anxiety lead to the cleanliness of the oral cavity which will be neglected. When experiencing stress, the body releases adrenaline and noradrenaline so that it not only leads to a decrease in blood circulation, but there is the possibility of altering the blood elements needed to maintain the body's resistance to disease.^{22,23}

In this article, the patient was diagnosed as having Grinspan's Syndrome, which is associated with erosive lichen planus, diabetes mellitus, hypertension. Dentists must be familiar with medical management of hypertension and diabetes mellitus patients by taking important role in the diagnosis and treatment of oral lesion with both of diseases in order to contribute to maintain optimum health.

Conclusion

Acknowledgements: All the listed authors contributed to patient's treatment and writing the article, and hereby stated that the manuscript has never been presented as part at a meeting.

Conflict of Interest: All authors reported no conflict of interest of this work

Source of Funding: This study was conducted with individual funding

Ethical Principle: This study is original and accordance with the ethical principle of non maleficence and confidentiality. This article has never been published and is not under consideration in other publications.

References

1. Ts N, Kumar S S, Rt A. Grinspan's Syndrome: A Variant. Unique J Med Dent Sci. 2016;04(03):14-16.
2. Taranu T, Esanu I, Grigorovici M, Toader MP. GRINSPAN'S SYNDROME. Rom J Oral Rehabil. 2013;5(4):22-26.
3. S H, M F, A G, N K. Grinspan's Syndrome-A Case Report. Case Study Case Rep. 2016;6(3):73-78.
4. Venugopal A, Maheswari TNU. Drug Delivery Tailored for the Need- Case Series of Oral Lichen Planus. J Young Pharm. 2018;10(2):246-248.
5. Gupta S, Jawanda MK. Oral Lichen Planus: An Update on Etiology, Pathogenesis, Clinical Presentation, Diagnosis and Management. Indian J Dermatol. 2015;60(3):222-9.
6. Lacy MF, Reade PC, Hay KD. Lichen planus: A theory of pathogenesis. Oral Surgery, Oral Med Oral Pathol. 1983;56(5):521-526.
7. Olson MA, Rogers RS, Bruce AJ. Oral lichen planus. Clin Dermatol. 2016;34(4):495-504.
8. Parashar P. Oral Lichen Planus. Otolaryngol Clin North Am. 2011;44(1):89-107.
9. Garlapati K, Naik V, Sharma G. The Grinspan Syndrome: "Fact" or "fiction" – A Meta Analysis research. J Pierre Fauchard Acad (India Sect. 2017;31(2-4):84-88.
10. Lamey PJ, Gibson J, Barclay SC, Miller S. Grinspan's syndrome: a drug-induced phenomenon? Oral Surg Oral Med Oral Pathol. 1990;70(2):184-5.
11. Yuan A, Woo S-B. Adverse drug events in the oral cavity. Oral Surg Oral Med Oral Pathol Oral Radiol. 2015;119(1):35-47.
12. Kökten N, Uzun L, Karadağ AS, Zenginkinet T, Kalcioğlu MT. Grinspan's Syndrome: A Rare Case with Malignant Transformation. Case Rep Otolaryngol. 2018;2018:1-4.
13. Avinash T, Kumar S, Sandhya T, Bhalerao S, Periera T, Venkateshwar G. Field Cancerization in Lichen Planus – An Unusual Case Report. Int J Med Dent. 2012;16(4):319-323.
14. Bajpai M, Agarwal D, Bhalla A, VatchalaRani RM, Kumar M. Unilateral lichen planus: A rare case report. J Nat Sci Biol Med. 2014;5(2):453-5.
15. Krupaa RJ, Sankari SL, Masthan KMK, Rajesh E. Oral lichen planus: An overview. J Pharm Bioallied Sci. 2015;7(Suppl 1):S158-61.
16. Goyal L, Gupta ND, Gupta N. Grinspan syndrome with periodontitis: Coincidence or correlation? J Indian Soc Periodontol. 2018;22(3):263-265.
17. Sethi E, Gulati M, Kaushal S, Singh OP. Grinspan's Syndrome-Affecting A 46 Year Old Male. Vol 02.; 2015.
18. I S, TS D. Grinspan's Syndrome: A Case of The Triad of Oral Lichen Planus, Hypertension and Diabetes Mellitus. ASEAN Meet Dent Public Heal. 2016;1(5):1-9.
19. Dudhia B, Dudhia S, Patel P, Jani Y. Oral lichen planus to oral lichenoid lesions: Evolution or revolution. J Oral Maxillofac Pathol. 2015;19(3):364.
20. Casparis S, Borm JM, Tektas S, et al. Oral lichen planus (OLP), oral lichenoid lesions (OLL), oral dysplasia, and oral cancer: retrospective analysis of clinicopathological data from 2002–2011. Oral Maxillofac Surg. 2015;19(2):149-156.
21. Huber MA. White oral lesions, actinic cheilitis, and leukoplakia: confusions in terminology and definition: Facts and controversies. Clin Dermatol. 2010;28(3):262-268.
22. Mhaske SP, SR B. Stress, Psychosomatic Disorders- Oral Reflection. Clin Dent. 2013;7(12):48-55.
23. Gavic L, Cigic L, Biocina Lukenda D, Gruden V, Gruden Pokupec JS. The role of anxiety, depression, and psychological stress on the clinical status of recurrent aphthous stomatitis and oral lichen planus. J Oral Pathol Med. 2014;43(6):410-417.



Indian Journal of Public Health Research & Development <editor.ijphrd@gmail.com>

Tue, Jul 9, 2019, 3:56 PM



to me ▾

Add Ethical Clearance just before the references and resubmit.

Ethical clearance- Taken from.....committee

...

--

with warm regards

Yours sincerely

Vidya Surwade

Associate Professor, Dr Baba Saheb Ambedkar, Medical College & Hospital

Rohinee, Delhi

www.ijphrd.com



Indian Journal of Public Health Research & Development <editor.ijphrd@gmail.com>

Wed, Apr 8, 1:57 PM



to me ▾

Find enclose soft copy of acceptance letter as attachment. India is in Lock-down due to corona virus. Our offices are closed. We are carrying limited work from home. No promise can be made for dates of publication.



Dr Vidya Surwade

Professor, Department of Community Medicine

Dr Baba Saheb Ambedkar, Medical College & Hospital

Rohini, Delhi





Indian Journal of Public Health Research & Development <editor.ijphrd@gmail.com>

Tue, Mar 24, 8:06 PM



to bcc: me

I am enclosing a Pre-release copy of **IJPHRD** March 2020, Please check carefully your article. Report any errors. Please do not try to update your article. Just look for errors. Reply within 2 days of this email.

Mention the title of the article for the correction along with the page number, correction without the mention of the title of the article and page, the number won't be entertained, preferably highlight the corrections with the pdf.

No amendments can be submitted to change the affiliation of author/s. only ERRORS would be corrected. No changes in the text are allowed except ERRORS of formatting.

--

with warm regards

Yours sincerely

Dr Vidya Surwade

Professor, Department of Community Medicine

Dr Baba Saheb Ambedkar, Medical College & Hospital

Rohini, Delhi

www.ijphrd.com

LEMBAR
HASIL PENILAIAN SEJAWAT SEBIDANG ATAU *PEER REVIEW*
KARYA ILMIAH : JURNAL ILMIAH

Judul Jurnal Ilmiah (Artikel) : Is It a Common Oral Lichen Planus or A Part of Grinspan’s Syndrome ?
Jumlah Penulis : 3 orang
Penulis Jurnal Ilmiah : Dwi Ariani, Harum Sasanti, Taufan Bramantoro
Status Pengusul : Penulis Pertama
Identitas Jurnal Ilmiah : a. Nama Jurnal : Indian Journal of Public Health
Research and Development
b. Nomor ISSN : 0976-5506
c. Volume, Nomor, Bulan Tahun : Vol. 11, No. 03, Maret, 2020
d. Penerbit : Institute of Medico-Legal Publisher India
e. DOI artikel : <https://doi.org/10.37506/ijphrd.v11i3>
f. Alamat Web Jurnal : (sudah diperbaiki)
URL ARTIKEL: <http://repository.moestopo.ac.id/index.php/UPDM/issue/view/28/dr-ariani-2019>
URL JURNAL: <http://medicopublication.com/index.php/ijphrd/article/view/1829/1705>
g. Terindeks di Scopus/Scimago/Web of Science/Clarivate: Ya/Q4
URL Indeks Scopus: <https://www.scopus.com/sourceid/19700188435>
URL Indeks Scimago: <https://www.scimagojr.com/journalsearch.php?q=19700188435&tip=sid&clean=0>

Kategori Publikasi Jurnal Ilmiah:

☒
☐
☐

 Jurnal Ilmiah Internasional/Internasional Bereputasi
Jurnal Ilmiah Nasional Terakreditasi
Jurnal Ilmiah Nasional/Nasional Terindeks di DOAJ,CABI

Hasil Penilaian Peer Review :

Komponen Yang Dinilai	Nilai Maksimal Jurnal Ilmiah			Nilai Akhir Yang Diperoleh
	Internasional Bereputasi	Nasional Terakreditasi	Nasional	
	25			
a. Kelengkapan unsur suatu Aartikel ilmiah (10%)	2.50			2.00
b. Ruang lingkup dan kedalaman pembahasan (30%)	7.50			6.50
c. Kecukupan dan kemutahiran data/informasi dan metodologi (30%)	7.50			6.50
d. Kelengkapan unsur dan kualitas terbitan/jurnal (30%)	7.50			7.50
Total = (100%)	25.00			22.50
Nilai Pengusul = (60%*22.50)= 13.50 (Dapat dipakai sebagai pemenuhan syarat khusus)				

Catatan penilaian artikel oleh *Reviewer* :

- Kesesuaian dan kelengkapan unsur isi jurnal:** sesuai dengan “Petunjuk bagi Penulis” (non Penelitian: Judul, Penulis, Isi, Kesimpulan, Daftar Pustaka). Tulisan merupakan hasil laporan kasus. Substansi artikel sesuai bidang ilmu penulis pertama (Ilmu Penyakit Mulut). Ada benang merah dalam struktur penulisannya (skor=2.00).
- Ruang lingkup dan kedalaman pembahasan:** substansi artikel sesuai dengan ruang lingkup jurnal (**Ruang Lingkup:** aplikasi ilmu penyakit mulut di bidang kedokteran gigi dan kesehatan). Kedalaman artikel laporan kasus cukup baik (skor=6.50).
- Kecukupan dan kemutakhiran data/informasi dan metodologi:** kebaruan kasus baik, sebagian besar daftar pustaka yang dipakai terbaru, informasi yang disampaikan tergolong baik (skor=6.50).
- Kelengkapan unsur dan kualitas terbitan:** jurnal ini kelompok jurnal internasional bereputasi dan keberkalaannya baik (skor=7.50).

Jakarta, 16 April 2021
Reviewer 1,

(Dr. Mirna Febriani, drg, M.Kes)
NIK. 71.02.18.97.00.2.1.3.147
Unit Kerja : Wakil Dekan I FKG UPDM (B)

LEMBAR
HASIL PENILAIAN SEJAWAT SEBIDANG ATAU *PEER REVIEW*
KARYA ILMIAH : JURNAL ILMIAH

Judul Jurnal Ilmiah (Artikel) : Is It a Common Oral Lichen Planus or A Part of Grinspan’s Syndrome ?
Jumlah Penulis : 3 orang
Penulis Jurnal Ilmiah : Dwi Ariani, Harum Sasanti, Taufan Bramantoro
Status Pengusul : Penulis Pertama
Identitas Jurnal Ilmiah : a. Nama Jurnal : Indian Journal of Public Health
Research and Development
b. Nomor ISSN : 0976-5506
c. Volume, Nomor, Bulan Tahun : Vol. 11, No. 03, Maret, 2020
d. Penerbit : Institute of Medico-Legal Publisher
India
e. DOI artikel : <https://doi.org/10.37506/ijphrd.v11i3>
f. Alamat Web Jurnal : (sudah diperbaiki)
URL ARTIKEL: <http://repository.moestopo.ac.id/index.php/UPDM/issue/view/28/dr-ariani-2019>
URL JURNAL: <http://medicopublication.com/index.php/ijphrd/article/view/1829/1705>
g. Terindeks di Scopus/Scimago/Web of Science/Clarivate: Ya/Q4
URL Indeks Scopus: <https://www.scopus.com/sourceid/19700188435>
URL Indeks Scimago: <https://www.scimagojr.com/journalsearch.php?q=19700188435&tip=sid&clean=0>

Kategori Publikasi Jurnal Ilmiah: ☒ Jurnal Ilmiah Internasional/Internasional Bereputasi
☐ Jurnal Ilmiah Nasional Terakreditasi
☐ Jurnal Ilmiah Nasional/Nasional Terindeks di DOAJ,CABI

Hasil Penilaian Peer Review :

Komponen Yang Dinilai	Nilai Maksimal Jurnal Ilmiah			Nilai Akhir Yang Diperoleh
	Internasional Bereputasi	Nasional Terakreditasi	Nasional	
	25			
e. Kelengkapan unsur suatu Aartikel ilmiah (10%)	2.50			2.50
f. Ruang lingkup dan kedalaman pembahasan (30%)	7.50			6.50
g. Kecukupan dan kemutahiran data/informasi dan metodologi (30%)	7.50			6.50
h. Kelengkapan unsur dan kualitas terbitan/jurnal (30%)	7.50			7.50
Total = (100%)	25.00			23.00
Nilai Pengusul = (60%*23.00)= 13.80 (Dapat dipakai sebagai pemenuhan syarat khusus)				

Catatan penilaian artikel oleh *Reviewer* :

- Kesesuaian dan kelengkapan unsur isi jurnal:** isi jurnal lengkap (skor=2.50).
- Ruang lingkup dan kedalaman pembahasan:** ruang lingkup jurnal sesuai dengan bidang penulis pertama (**Ruang Lingkup:** aplikasi ilmu penyakit mulut di bidang kedokteran gigi dan kesehatan). Kedalaman artikel baik (skor=6.50)
- Kecukupan dan kemutakhiran data/informasi dan metodologi:** kebaruan kasus yang ditampilkan tergolong baik, daftar pustaka yang dipakai terbaru dan lengkap (skor=6.50).
- Kelengkapan unsur dan kualitas terbitan:** jurnal ini kelompok jurnal internasional bereputasi dan kualitas jurnal baik (skor=7.50).

Jakarta, 16 April 2021
Reviewer 2,

(Ratih Widyastusi, drg, MS, Sp. Perio)
NIK.61.04.17.87.00.2.1.3.088
Unit Kerja : Kepala Departemen Periodonsia FKG UPDM (B)