

CASE 7

- Name: 張 O O
- Gender: Male
- Age: 79 y/o
- First visit: 97.01.03
- **Chief complaint**
A painless mass over lower left edentulous ridge for 2 weeks



Present Illness

- **This 79 y/o male suffered from a soft tissue mass over lower left posterior edentulous ridge for 2 weeks. He was brought to a LDC and the dentist suggested him to come to our hospital.**
- **96.12.29 – He came to our ER for treatment . Periodontal emergency treatment was performed and appointment of OS OPD was arranged.**
- **97.01.03 – He came to OS OPD**

Past History

- **Past medical history**

Renal dialysis

Hospitalization due to pleural effusion

HTN

- **Past dental history**

NP

- **Oral habit**

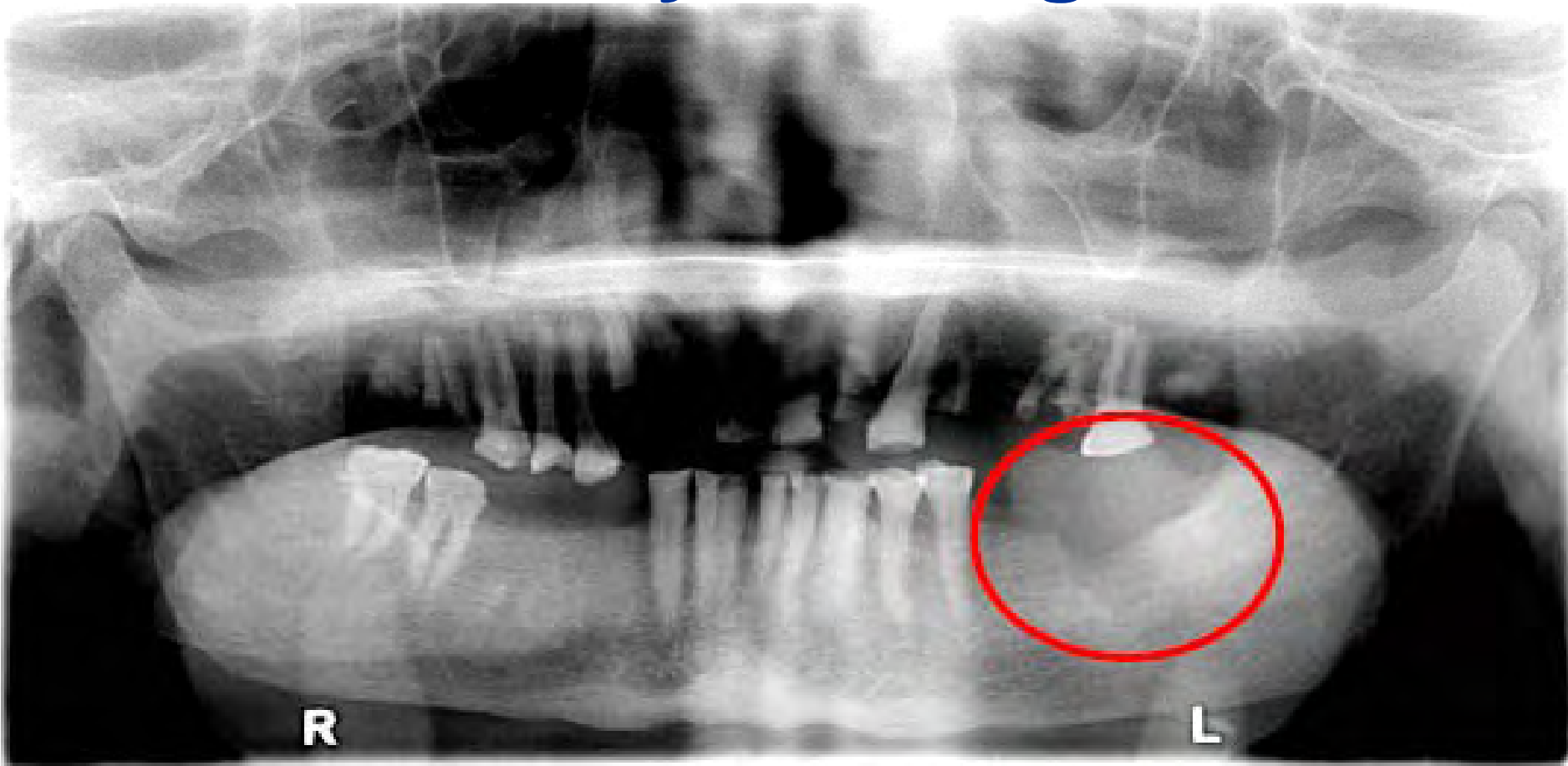
A (-), B (-), C (-)

Intra-Oral Findings

- **A soft tissue mass over teeth 36-37 edentulous ridge**
- **Shape: dome**
- **Consistency: rubbery**
- **Surface: ulcerative with biting trauma**
- **Color: yellowish to pink**
- **Base: sessile, fixed**
- **Fluctuation(-), induration(+), pain(-)**
- **Easily bleeding**



X-Ray Findings



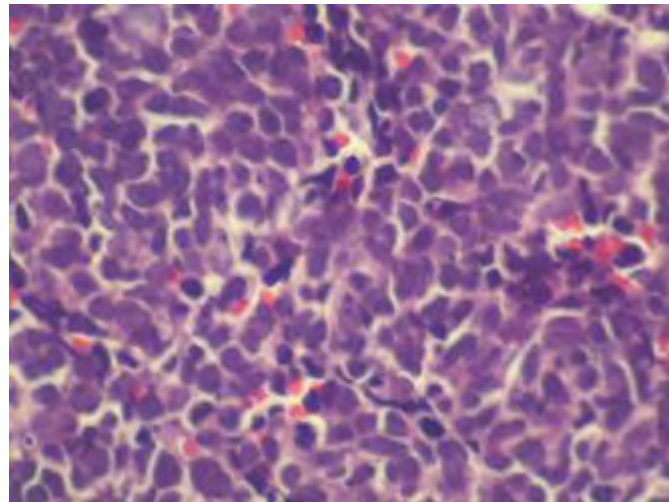
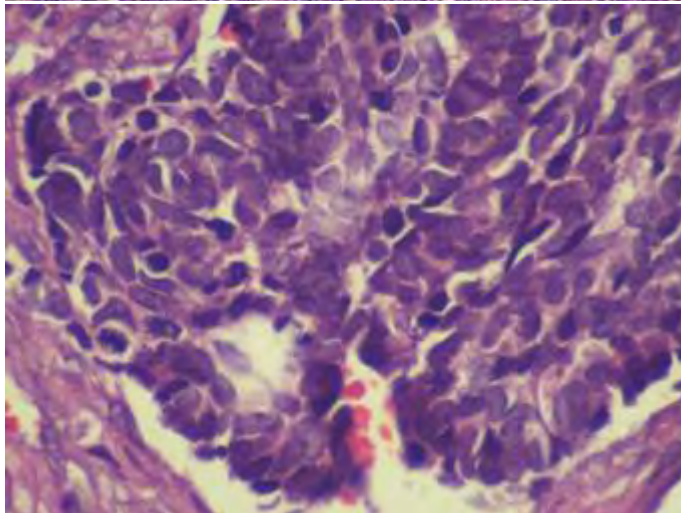
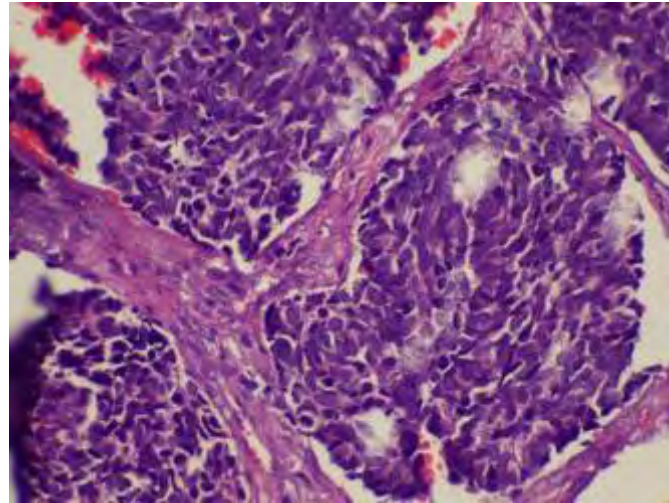
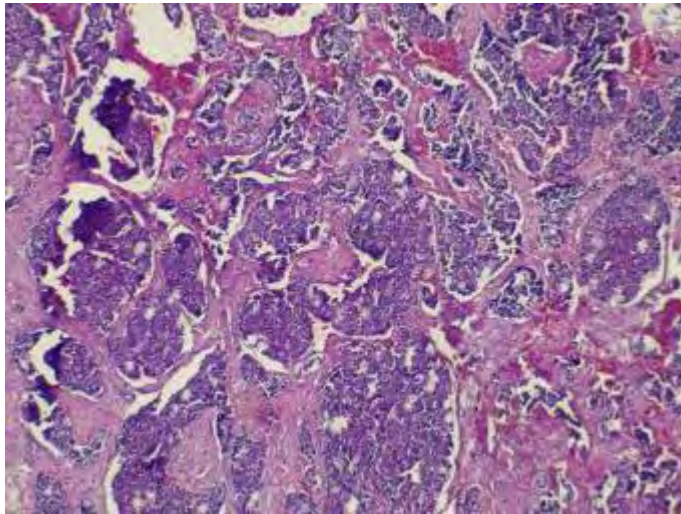
A soft tissue mass image over the lower left edentulous ridge with alveolar bone destruction from crest to midpoint of mandibular body, measured 2.5x2.5 cm in size.

Clinical Impression & Treatment Course

- **Clinical impression**
SCC over left mandibular body
- **Treatment course**
96.01.03 – incisional biopsy, sent for HP exam

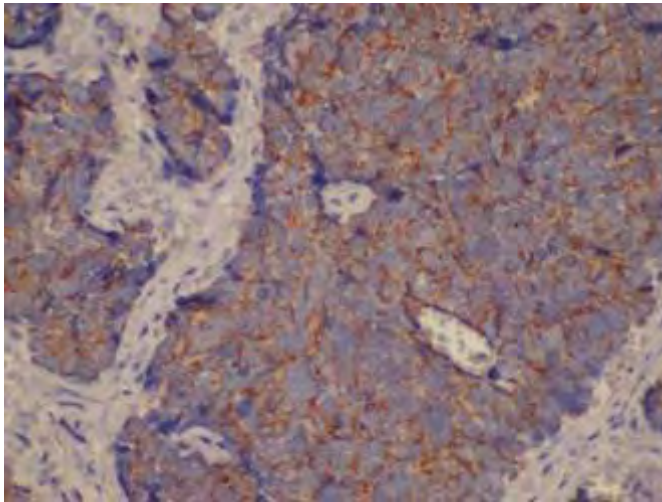
Microscopic Findings

97.01.03

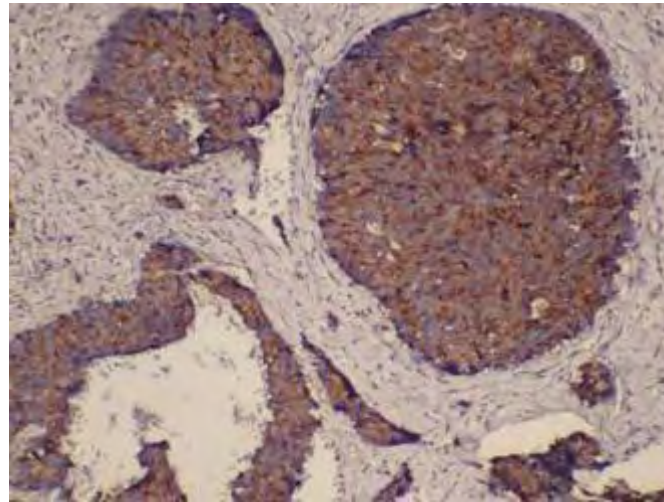


Immunohistochemistry

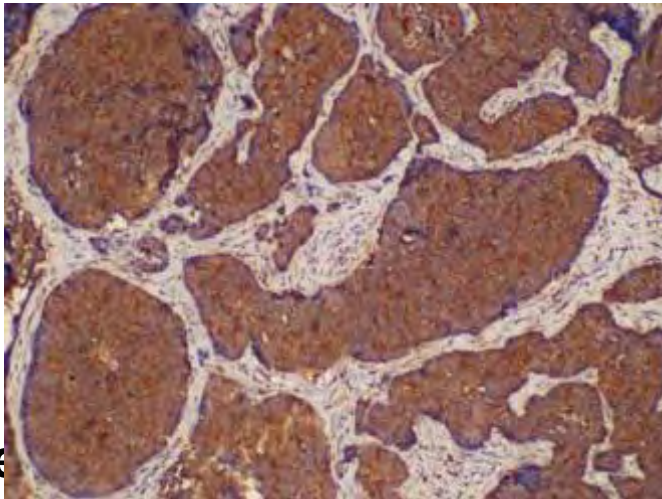
CK (+)



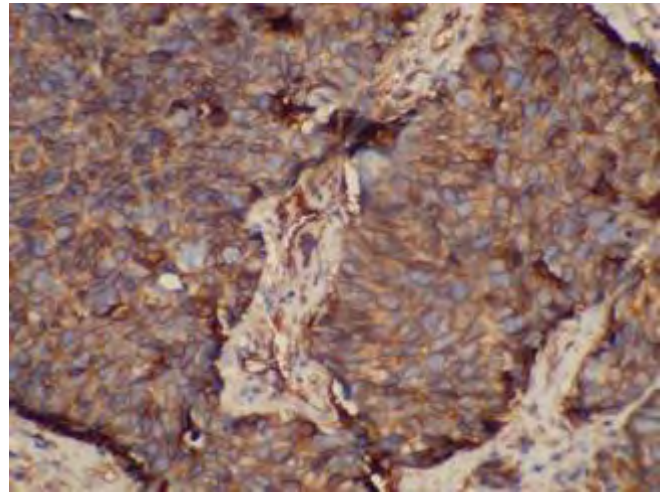
NSE (+)



Chromage



CD99 (+)



Final Diagnosis

- **Peripheral neuroectodermal carcinoma, possibly metastatic from non-small cell lung carcinoma**

Oral cavity, Edentulous ridge, Lower left , Incision

CASE 8

- **Name:** 伍 O O
- **Gender:** Female
- **Age:** 62 y/o
- **First visit:** 96.02.01
- **Chief complaint**
Swelling and bleeding over right posterior maxilla for 2 weeks



Present Illness

- **Present Illness**

This 62 y/o female suffered from a swelling mass over right posterior maxilla for 2 weeks. She received routine dental treatment in a LDC but no improvement. The dentist suggested her to our OPD for further management.

Past History

- **Past medical history**

Renal dialysis for 9 years

- **Past dental history**

NP

- **Oral habit**

A (-), B (-), C (-)

Intra-Oral Findings

- **Swelling over buccal and palatal gingiva from 14 distal to tuberosity with bony expansion**
- **Size: 4x2.5 cm**
- **Color: red**
- **Surface: irregular**
- **Consistency: bony hard**
- **Fluctuation(-), tenderness(+), Pain(+),**



X-Ray Findings – Pano film

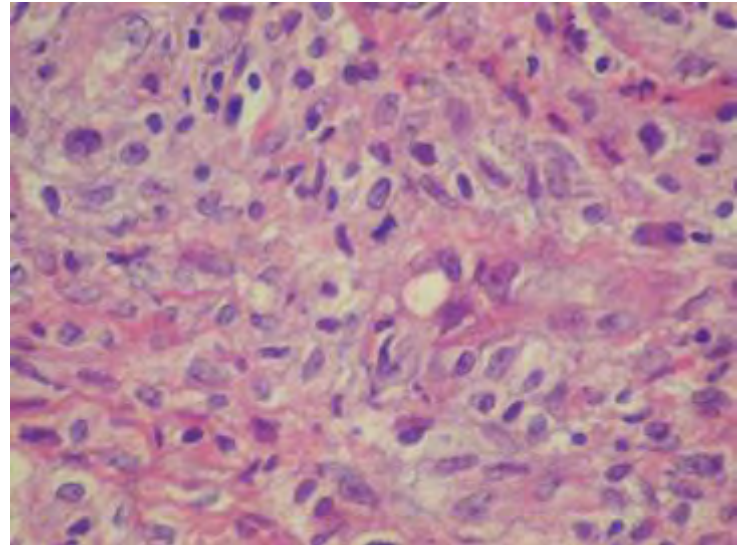
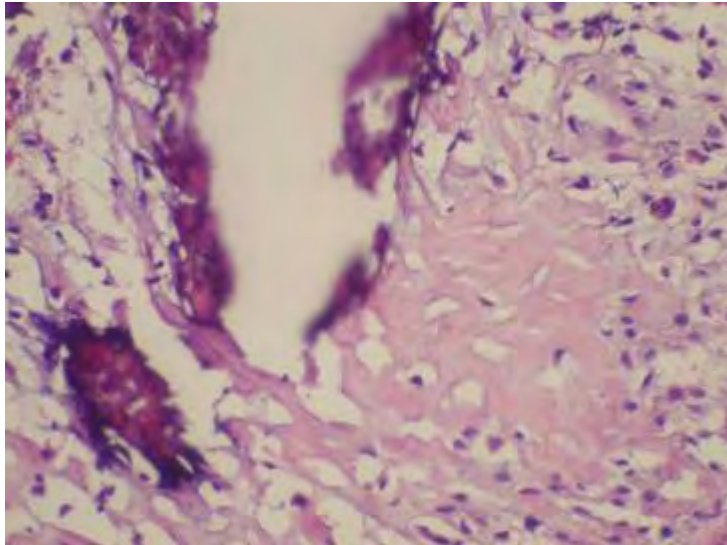
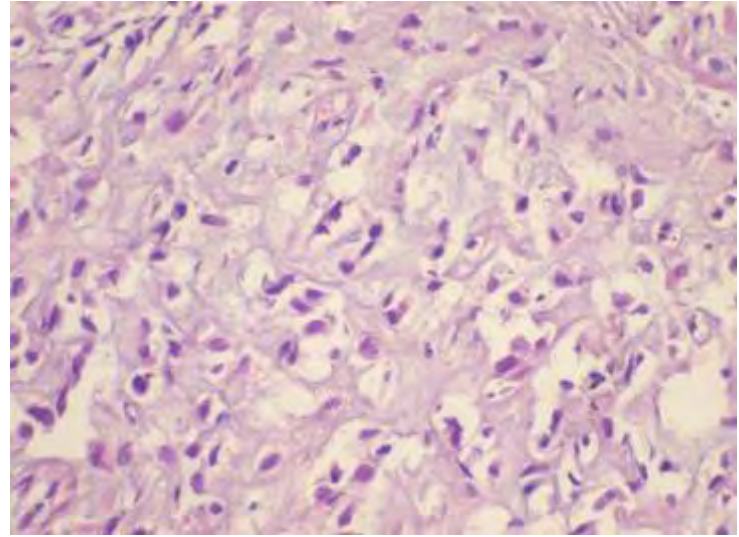
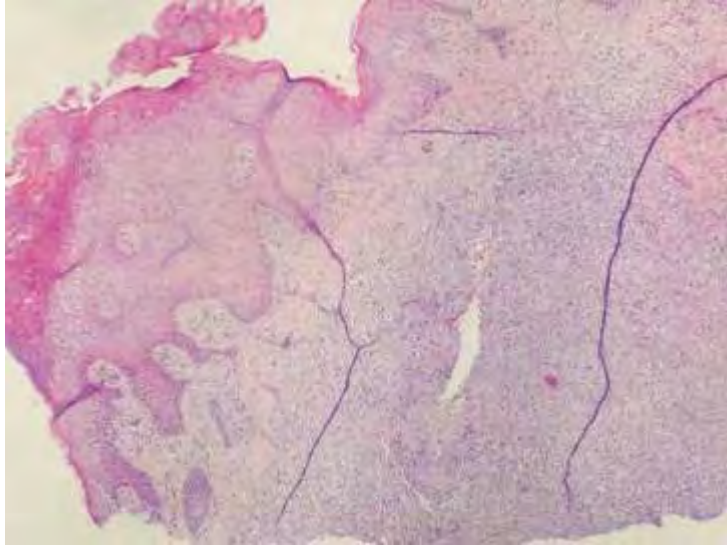


A R/O(apical 14-16) mixed with R/L(17-tuberosity) lesion from from 14 apical to tuberosity from alveolar crest to sinus floor, about 4.5x2.0 cm in dimension.

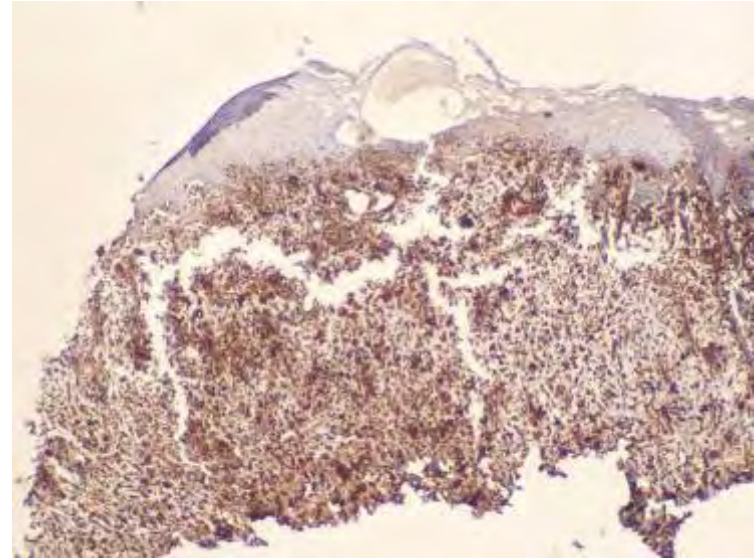
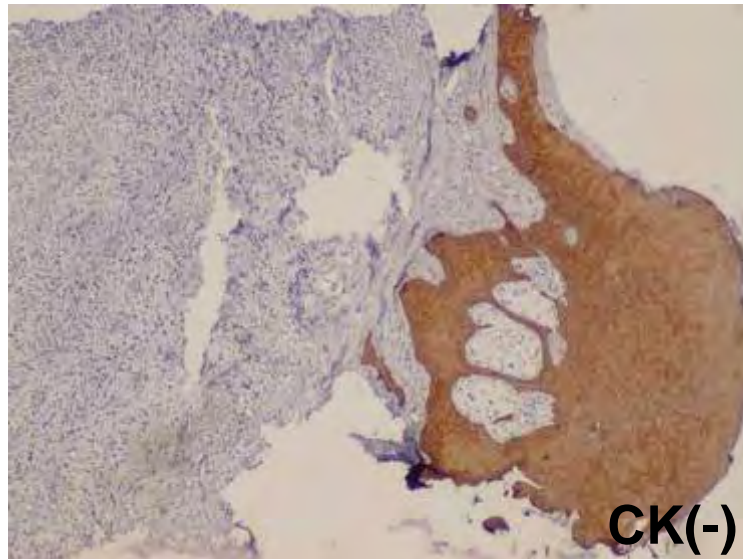
Clinical Impression & Treatment Course

- **Clinical impression**
SCC over left anterior maxilla
- **Treatment course**
97.02.01 – Periodontal emergency treatment
97.02.04 – incisional biopsy
97.02.13 – CT exam

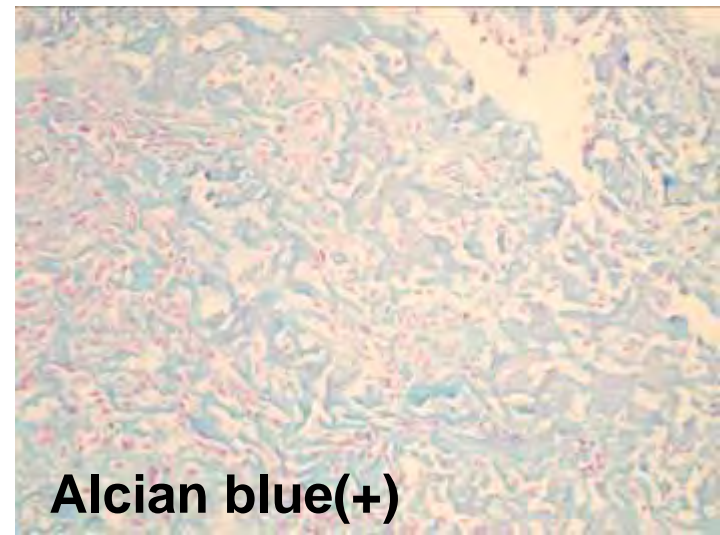
Microscopic Findings



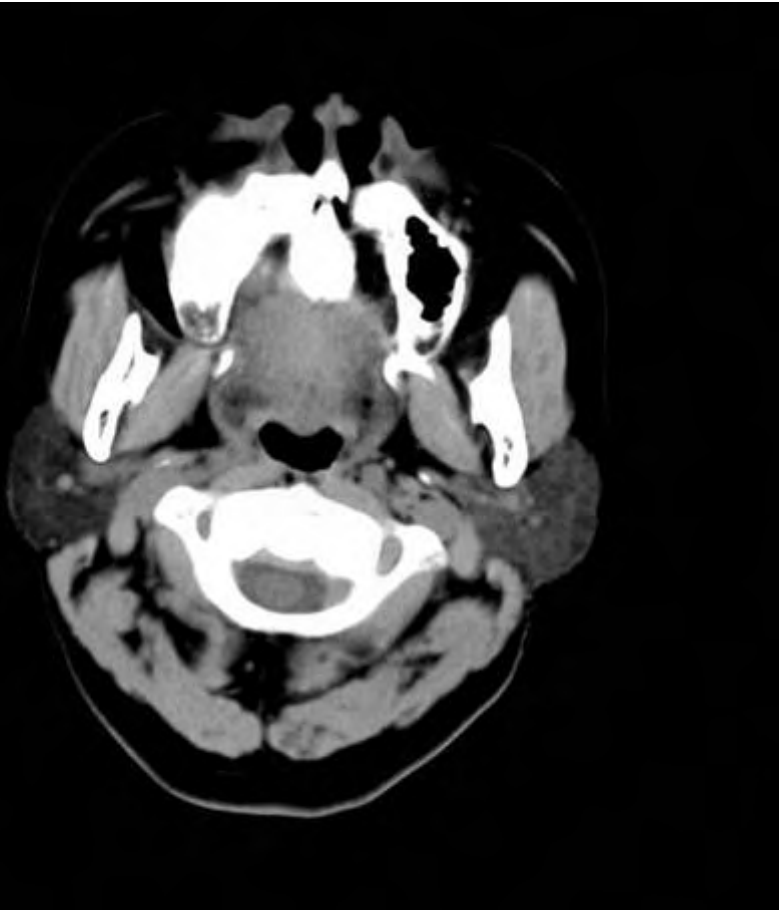
Immunohistochemistry



Histochemistry



CT Findings



Bone density mass over right posterior maxilla with prominent bony expansion

Final Diagnosis

- **Osteosarcoma**

Bone, Maxilla, Right, Incision

CASE 9

- Name: 陳 O O
- Gender: Male
- Age: 31 y/o
- First visit: 96.12.
- Chief complaint
An ulcer over lower lip



Present Illness

- **Present illness**

This 31 y/o male suffered from an ulcerative lesion over right lower lip for 2 months.

- **Past medical history**

NP

- **Past dental history**

NP

- **Oral habit**

A (+), B (+), C (+)

Intra-Oral Findings

- **Size: 3x2cm**
- **Color: white & red**
- **Surface: ulcerated**
- **Base: seeile**
- **Shape: nodule**
- **Consistency: rubbery**
- **Mobility: fixed**
- **Pain (-), tenderness (+), induration (+)**



Clinical Impression & Treatment Course

- Clinical impression

SCC over right lower lip

- Treatment course

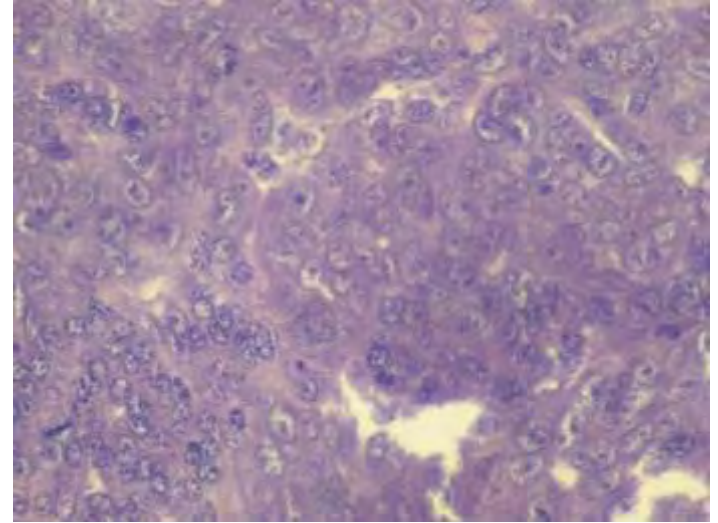
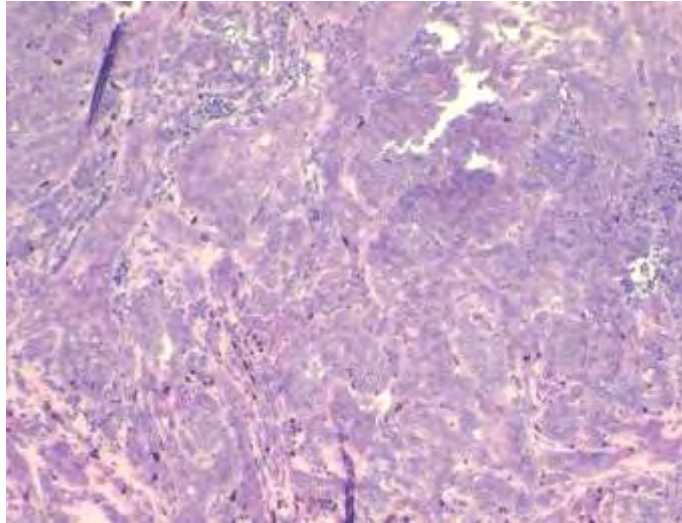
96.12.17– 1st incisional biopsy, right lower lip

96.12.24 – 2nd incisional biopsy, left lower ridge

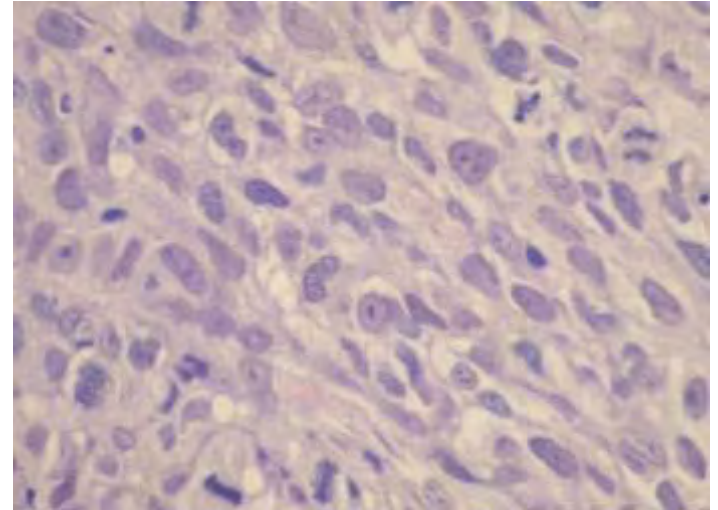
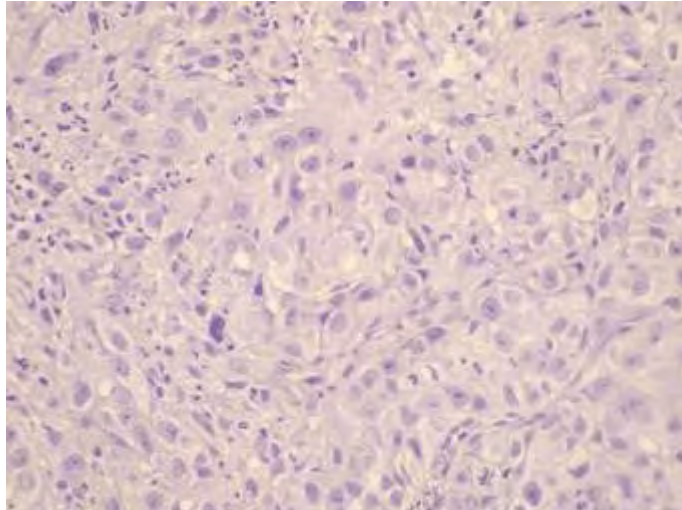
Microscopic Findings

1st & 2nd Biopsies

1st biopsy



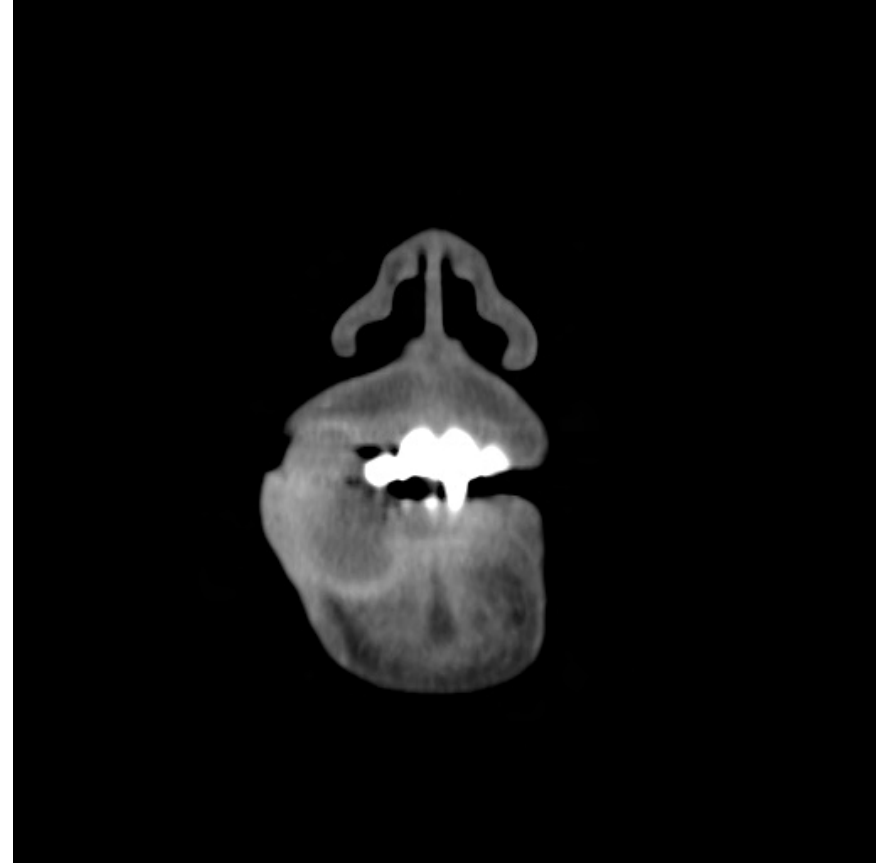
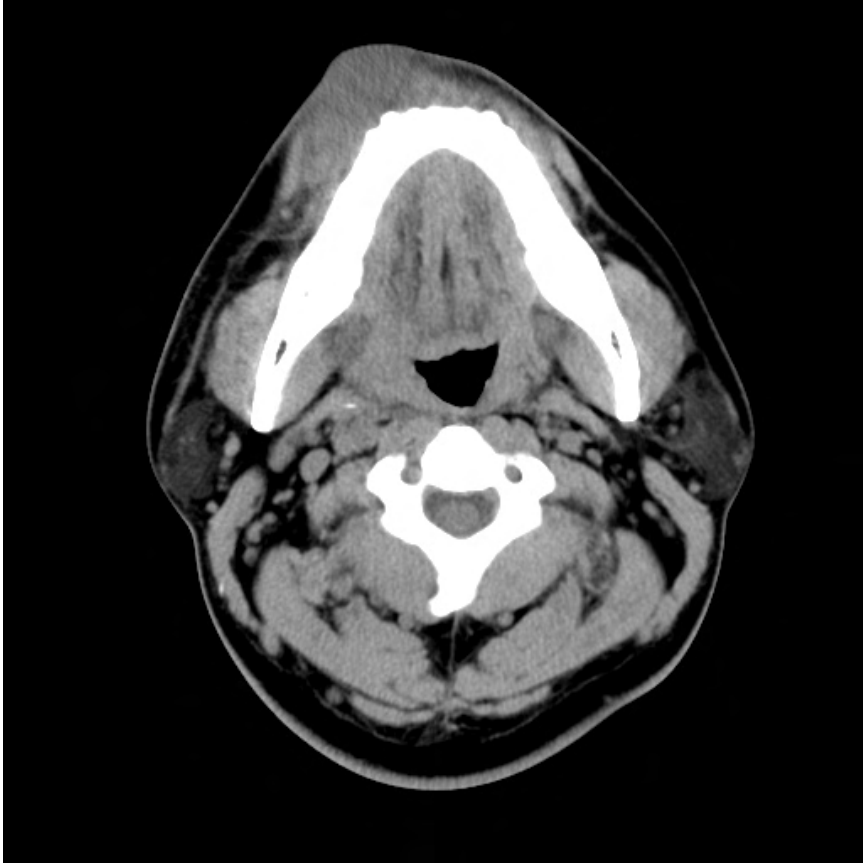
2nd biopsy



HP Report & Treatment Course

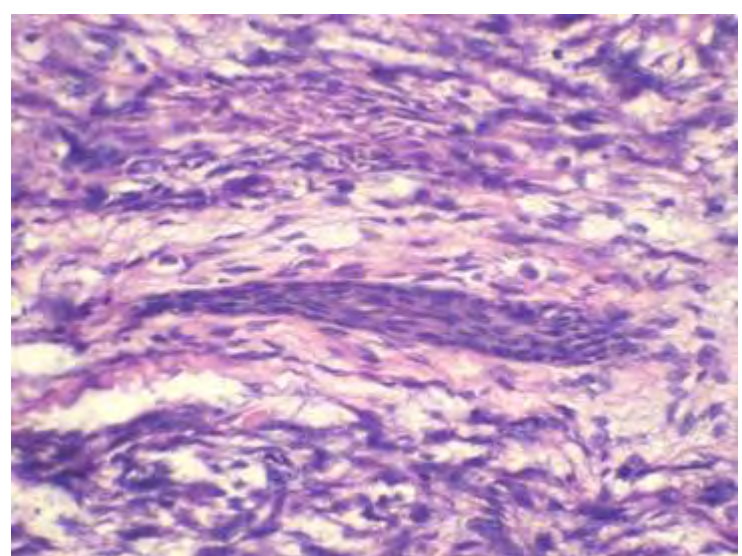
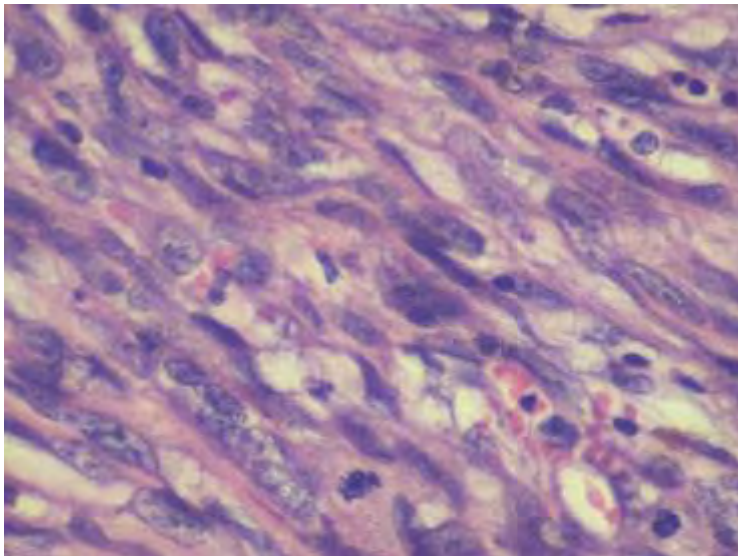
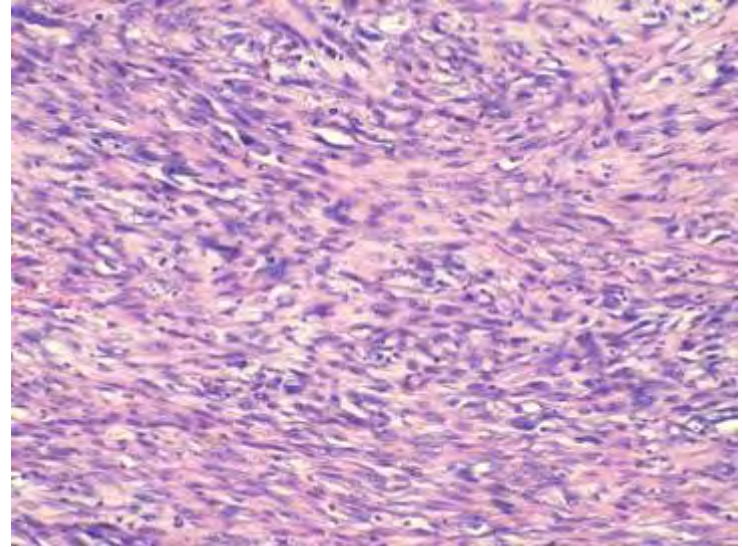
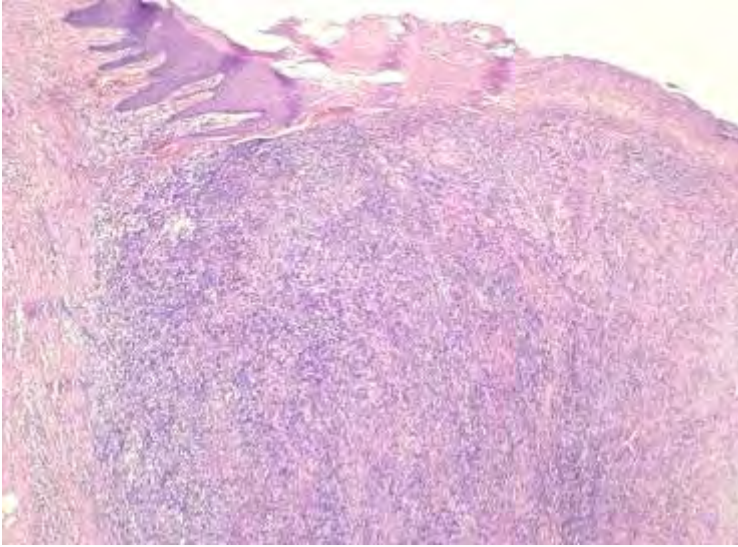
- HP report of 1st and 2nd biopsies
Squamous cell carcinoma, grade II
Oral cavity, Lower lip, Right, Incision
- Treatment Course
 - 97.01.04 – CT exam
 - 97.01.25 – oncology, IAIC
 - 97.04.18 – OP under GA

CT Findings

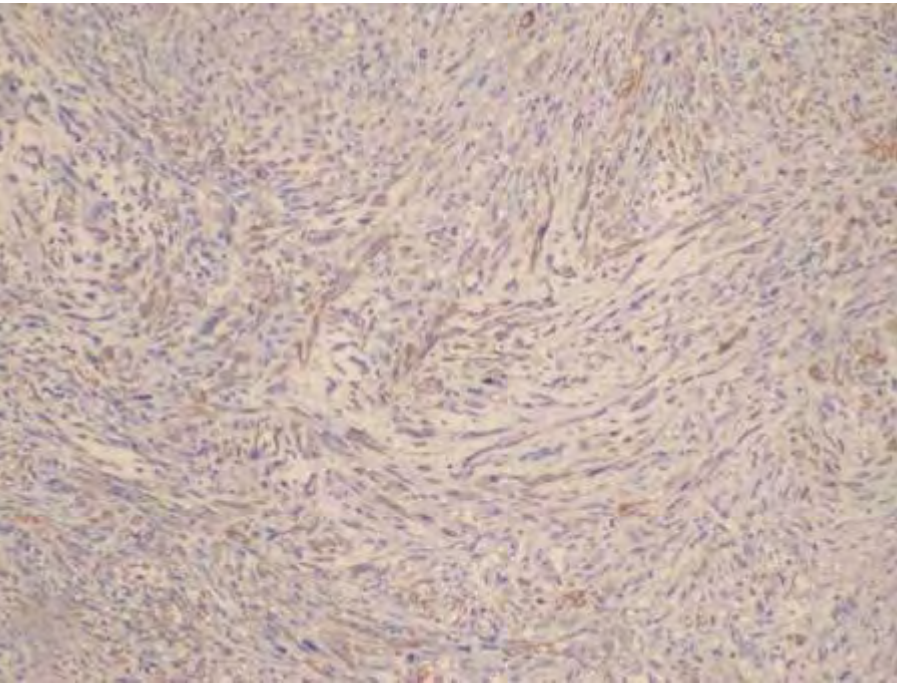


**Soft tissue mass over lower lip, about 2.7x1.7x1.2 cm,
T2N0Mx, stage II**

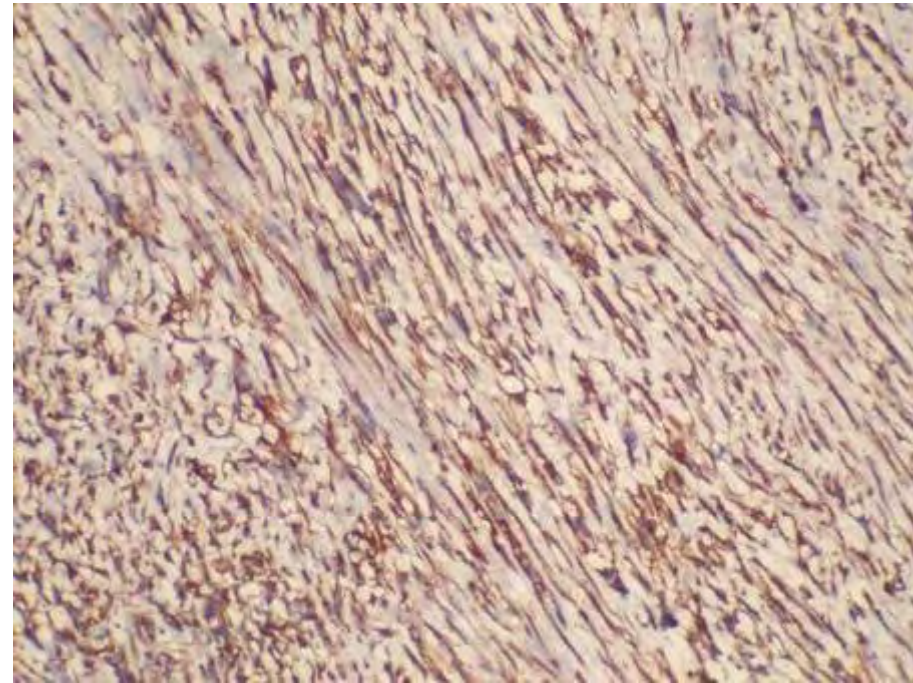
Microscopic Findings



Immunohistochemistry



CK (+)



Vimentin (+)

Final Diagnosis

- **Spindle cell carcinoma, T2N2M0,
stage IV**

Oral cavity, Lower lip, Right, Excision

Metastatic spindle cell carcinoma

**Lymph node, Submandibular, Right
RND**

CASE 10-1

- **Gender: Male**
- **Age: 46 y/o**
- **First visit: 96.10.01**
- **Chief complaint**
Pain over lateral tongue, mouth angle and lips for 2 years

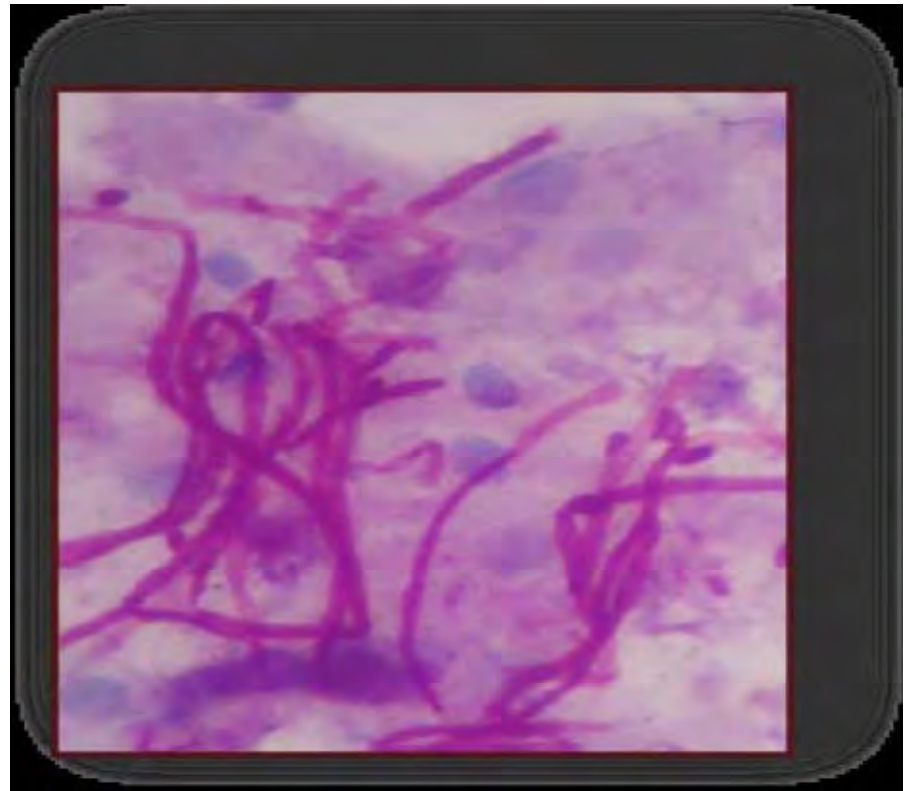
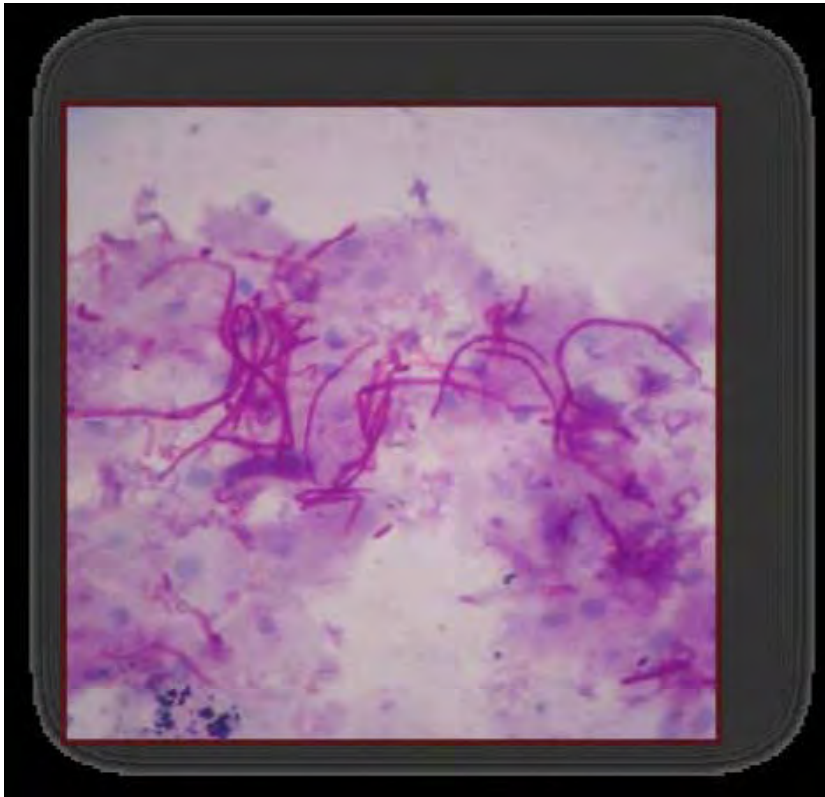
- **Past medical history**
Hospitalization: right mandibular body fracture
Herpes zoster
- **Past dental history**
NP
- **Oral habit**
A (+), B (+) 戒三年,
C (+)

Intra-Oral Findings

- **Multiple removable patches over bil. BM, upper lip, lower lip and tongue dorsum**



Smear Slide



Clinical Impression & Treatment Course

- Clinical impression

Candidiasis over bil. BM, upper lip,
tongue dorsum

- Treatment course

96.10.01 – Mycostatin oral suspension

96.10.09 – S/S improved, medications stopped

96.10.17 – White patches appeared again

Arrange lab survey to R/O immune deficiency

→ **HIV(+)**

Referred to 感染科 for further management.

CASE 10-2

- **Gender: Male**
- **Age: 31 y/o**
- **First visit: 96.11.05**
- **Chief complaint**
Multiple white spots over full mouth for 2 months
- **Past medical history**
Syphilis 4 years ago
- **Past dental history**
NP
- **Oral habit**
A (-), B (-), C (-)

Intra-Oral Findings

- **Removable whites over bil. BM, palate, tongue dorsum**
- **Cough, pneumonia for 2 months**



Clinical Impression & Treatment Course

- Clinical impression
Candidiasis over bil. BM, palate, tongue dorsum

- Treatment

Smear cytology: candidiasis

Arrange lab survey to R/O immune deficiency

→ **HIV(+)**

Referred to 感染科 for further management.