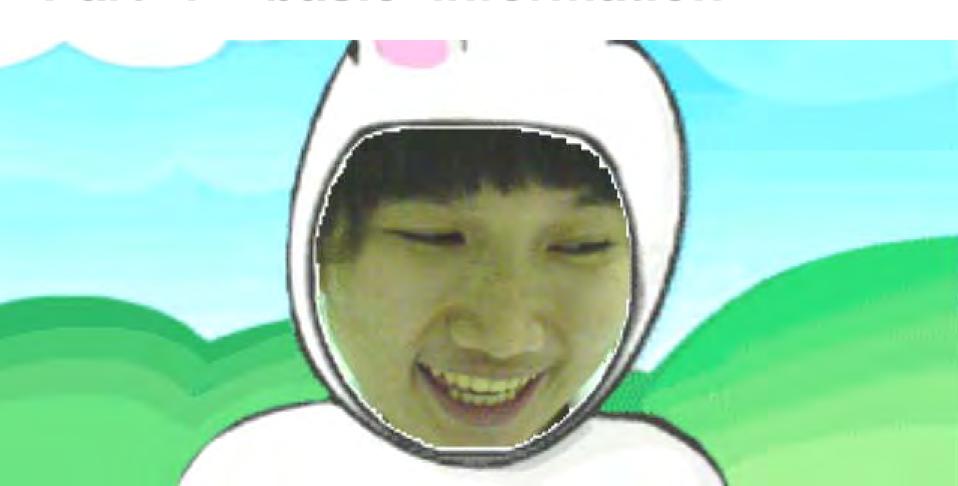
初診科 Case Report A case of ameloblastoma

指導醫師: 林立民醫師 陳玉昆醫師 王文岑醫師 陳靜怡醫師

報告人:實習][組

Int. 詹至翔 張閔傑 黃齡瑤 曾上純 洪郁文





General Data

- Name: 陳新縣
- Sex : male
- Age : 52 y/o
- Native: 台南縣
- Marital status:已婚
- Occupation: 機械修理
- Attending V.S.: 黃逸岳醫師
- First visit: 96.06.08



Chief Complaint

Tooth mobility of tooth 31 32 33 34







Present Illness

The 52 y/o male suffered from the episode of tooth 31 32 33 34 mobility about a month. He had visited 家禾 LDC for help in the beginning of May in 2007. Then, periapical film was taken and the doctor found the RL cystic lesion over mandibular symphysis area. Therefore, the doctor referred him to our OPD for further examination and treatment.

Past History

- Past Medical History
 - Anemia
 - Denied any systemic disease
 - Denied any drug or food allergy
 - Hospitalization(-)
- Past Dental History
 - Extraction
 - OD
 - Prosthesis
 - Experience of dental treatment : fair

Personal History

- Risk factors related to malignancy
 - -Alcohol:(+),?瓶/天
 - -Betel quid: (-)
 - -Cigarette: (-)
- P't likes to eat spicy food.

Family History

- Hereditary disease: Nil
- Family support : good

Intraoral Examination

- mobility of tooth 31 32 33 34
 - Duration: 1+ month
 - Smooth surface
 - Swelling over lingual side
 - Color : normal pink
 - No discharge
 - The adjacent mucosa seemed to be normal.





Intraoral Examination (cont.)

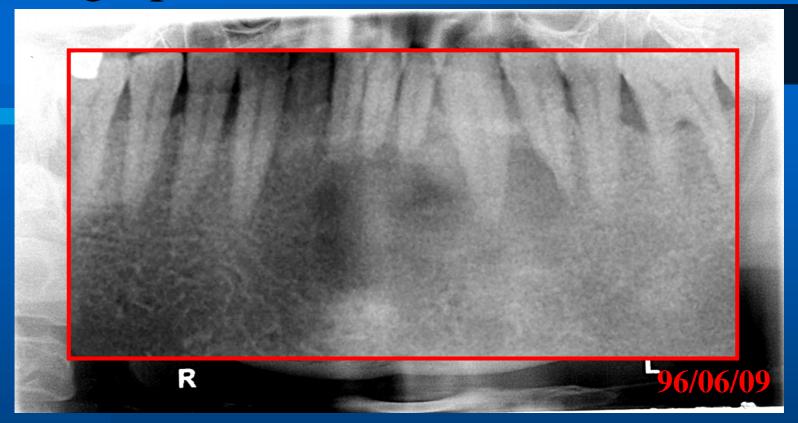
- Dental findings :
 - Missing: 16, 18, 28, 38
 - Bridge: 15x17 (metal)
 - Restoration: 46
 - Tooth mobility: 31 32 33 34 grade(?)

Physical Examination

• EPT:
$$_{3}$$
 \rightarrow (+); $_{1234}$ \rightarrow (-)

- Consistency : bony hard
- Fluctuation (-)
- Pain (-)
- percussion pain(-) → tooth 31 ~ 37
- Tenderness (-)
- Induration (-)
- Fever or local heat (-)
- Lower lip paresthesia (-)
- Lymphadenopathy (-)

Radiographic Examination (Panoramic film)



A well-defined, scallope-shaped, unilocular radiolucency without corticated margin over mandibular symphysis, extending from the medial side of tooth 34 to the mesial side of tooth 43 and from middle third of tooth 33 root down to the 1/2 mandibular symphysis, measured approximately 4.0 x 2.0 cm in diameter. Lamina dura of involving root disappeared. Root resorption was noted at tooth 33, 34 and the lesion didn't involve in L't mental foramen.

Radiographic Examination

- Bridge: 15x17 (metal)

- Root resorption: 33, 34



Dental findings:

- Missing: 16, 18, 28, 38

- Filling: 46

- Total bone loss: 15

- Generalized periodontotitis

No other abnormalities were observed.

Radiographic Examination (Periapical film)

A well-defined, irregular shape, unilocular radiolucency without corticated margin, extending distally to the mesial side of tooth 35 and up from the alveolar crest. Lamina dura of involving root disappeared. Root resorption was noted at tooth 33, 34. Besides, vertical expansion was seen at the alveolar crest near 33 mesial side.



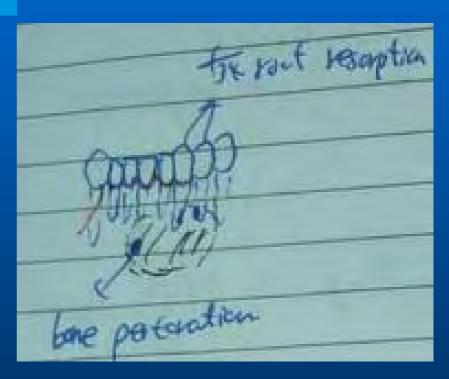
Radiographic Examination (Occlusal film)

Teeth crowding over lower ant. region



Treatment course (96/06/12)

- Biopsy:
 bone perforation
 was noticed over
 apex of tooth 41 \ 42
- Aspiration :
 clear with light
 yellowish discharge





Part 2 – Working Diagnosis



Working diagnosis

- Inflammation? Cyst? Neoplasm?
 - Fever or local heat (-)
 - Duration: 1+ month
 - well-defined RL
 - swelling (+)
 - pain (-)
 - normal pink

rule out inflammation

Cyst or Neoplasm

Central? Peripheral?

- smooth surface
- adjacent mucosa
 - → normal

- well-defined RL
- -bone expansion
- Root resorption
- bone perforation

Central

Cyst? Neoplasm?

- Fluctuation(-)
- Aspiration (+)
- well-defined RL
- Induration (-)
- adjacent mucosa → normal
- Lymphadenopathy (-)
- Duration: 1+ month
- paresthesia (-)
- Smooth surface
- pain(-)
- tenderness(-)

- Lower Tooth mobility
- Bone perforation
- Bone expansion
- Root resorption

Cyst

Or

Benign tumor (cystic change)

Cyst (central type)

Odontogenic

Scalloped-shape margin

No-associtated uneruption teeth

Radicular cyst

Odontogenic keratocyst

Glandular odontogenic cyst

Dentigatous cyst

nonodontogenic

Teeth nonvital(EPT-)

Teeth mobility & root resorption

Aspiration: clear to yellow

Simple bone cyst

Aneurysmal bone cyst

Rule out

Cyst

- **■** Clinical feature
- $-EPT(-):31 \sim 34$
- Smooth surface
- Adjacent mucosa → normal
- Swelling(+)
- tooth mobility
- Color : normal pink
- Consistency: bony hard
- Fluctuation (-)
- Duration: 1⁺ month
- Pain (-)
- Percussion pain(-)
- Tenderness (-)
- Induration (-)
- Aspiration (+) → clear Radicular cyst yellowish discharge

- **■** X-ray feature
- Periapical radiolucency
- well-defined RL without corticated margin
- bone expansion
- Lamina dura of involving root disappear
- Root resorption

Radicular cyst
Odontogenic keratocyst
Glandular odontogenic cyst

Neoplasm (central type)

Odontogenic

Teeth nonvital(EPT-)
Teeth mobility & root resorption

Aspiration(+): clear to yellow

Ameloblastoma(solid type)

Unicystic ameloblastoma

Cemento-ossifying tibroma

Cemento-ossifying dysplsia

nonodontogenic

Teeth nonvital(EPT-)

Teeth mobility & root resorption

Aspiration: clear to yellow

Central giant cell granuloma Hemangioma

Rule out

Benign tumor

- **■** Clinical feature
- $-EPT(-):31 \sim 34$
- Smooth surface
- Adjacent mucosa → normal
- Swelling(+)
- tooth mobility
- Color: normal pink
- Consistency: bony hard
- Fluctuation (-)
- Duration: 1+ month
- Pain (-)
- Percussion (-)
- Tenderness (-)

- X-ray feature
- Periapical radiolucency
- well-defined RL without corticated margin
- bone expansion
- Lamina dura of involving root disappear
- Root resorption

Conventional solid ameloblastoma (cystic change)

Unicystic ameloblastoma

Cyst

- Radicular cyst
- Odontogenic keratocyst (OKC)
- Glandular odontogenic cyst

Benign tumor

- Conventional solid ameloblastoma (cystic change)
- Unicystic ameloblastoma

Part 3 -

Differential Diagnosis



Differential Diagnosis

- Conventional solid ameloblastoma (cystic change)
- Unicystic ameloblastoma
- Radicular cyst
- Odontogenic keratocyst (OKC)
- Glandular odnotogenic cyst

Conventional solid ameloblastoma (cystic change)



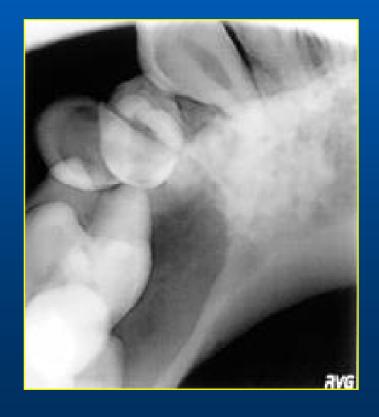


	Conventional solicameloblastoma	d Our case
Age	30~70	52
Gender	No predilection	Male
Site	Md. Molar-ramus	Md. Anterior
Symptom	Painless swelling	Painless swelling
Margin	Well-defined with corticated margin	Well-defined without corticated margin

	Conventional solid ameloblastoma	Our case
X-ray feature	Multilocular or Scalloping unilocular	Scalloping unilocular
Bony expansion	+	+
root resorption	+	+
other	Associated with unerupted tooth	_

Unicystic ameloblastoma





	Unicystic ameloblastoma	Our case
Gender	Male	Male
Age	2nd decade (23)	52
Site	90% mand. Post. area	Md. Anterior
Symptom	Asymptomatic	Painless swelling
	Painless swelling	
Margin	Well-defined with	Well-defined
	corticated margin	without corticated
		margin

	Unicystic	Our case
	ameloblastoma	
X-ray feature	unilocular	Scalloping unilocular
Density	radiolucence	radiolucence
Bony	+	+
expansion		
root resorption	+	+
Effects on	No effect	Root resorption
surrounding	Large lesion –	Bony expansion and
structure	bony expansion	perforation
other	Associated with	_
	unerupted tooth	

Radicular cyst





	Radicular Cyst	Our case
Gender	Male (Slightly)	Male
Race	Unspecific	Asian
Age	Medium age(30~50 y/o)	52
Site	apex of nonvital tooth	Mandibular ant.
Symptom	Asymptomatic Secondary infection or too large → swelling	Swelling(+) Fluctuation(-) Aspiration(+) Pain(-) Tenderness(-) Smooth surface

	Radicular Cyst	Our case
Margin	well-defined, with corticated margin	well-defined, without corticated margin
X-ray feature	Unilocular	Scalloping unilocular
Size	Usually > 2cm	4.0 x 2.0 cm
Density	Radiolucency	Radiolucency
Effects on surrouding structure	no effects Or teeth displacement, tooth resorption, bone expansion	Root resorption Bone expansion and perforation

Odontogenic Keratocyst









	OKC	Our case
Age	Wide range	52
	$(10\sim40 \text{ y/o} > 60\%)$	
Gender	Male (Slightly)	Male
Site	Posterior mandibular body+ramus	Mandibular ant.
Symptom	asymptom or pain, swelling, drainge	Painless swelling
Bone expansion	Rare, 通常是A-P方向的 extension	bone expansion
X-ray feature	Unilocular/multilocular	Scalloping Unilocular

	OKC	Our case
Density	Radiolucence	Radiolucence
Margin	Well-defined with corticated margin	Well-defined without corticated margin
Root resorption	Rare	+

Glandular odontogenic cyst

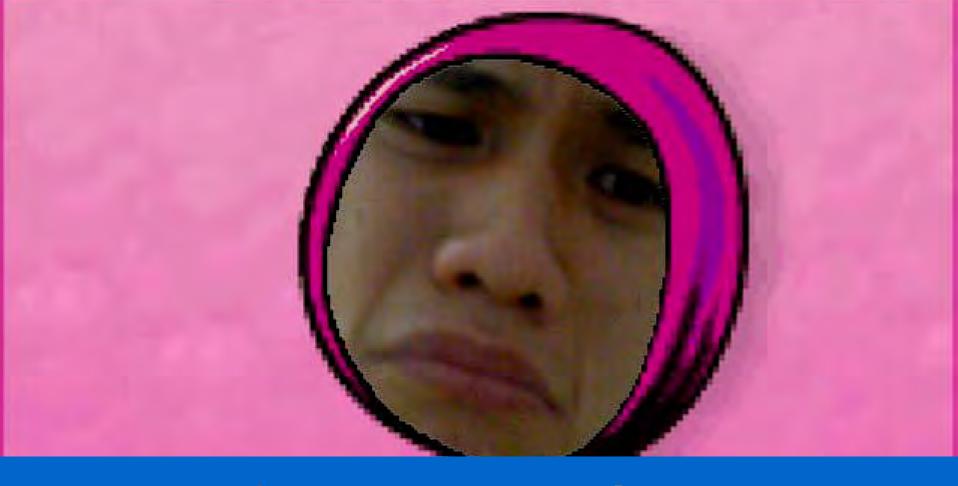


	GOC	Our case
Ages	Middle age adult	52
	(Avg:49y/o)	
Gender	unknown	Male
Site	Strong predilection:	Mandibular
	Jaw anterior region	ant.
	(many cross midline)	
Symptom	Small lesion may asymptomatic	Pain(-) swelling(+)
	Large -may pain and parethesia(+)	

	GOC	Our case
Bone	Large(+)	bony
expansion		expansion
		and
		perforation
X-ray	Unilocular/	Scalloping
feature	multilocular more	Unilocular
	commonly	

Clinical impression

 Ameloblastoma, intraoral, mandibular symphysis area, apex of tooth 42 ~ 35



~Thanks for your attention

