

Case report

報告者: Intern F組

指導醫師: 口腔病理科全體醫師

報告日期: 2007.09.24

General Data

- Name : 謝XX
- Sex : 男
- Age : 51 y/o
- Native : 台灣
- Marital status : 已婚
- Attending Dr. :
陳靜怡 醫師
- First visit : 96/08/04



Chief Complaint

- A swelling mass over R't hard palate for 2 weeks



Present Illness

- The 51 y/o male suffered from above episode two weeks ago. At the same time, he was on the course of 風濕免疫 therapy in KMU. He asked his KMU physician about this problem. Then, his physician referred him to our OPD for further evaluation.

Past Medical History

- **Past Medical History**

- Drug allergy : penicillin

- Rheumatoid Arthritis: Hospitalization(+)
under medication therapy now

- L't salivary glands tumor which had been treated
and tumor had been removed in an unknown
Hospital

- hepatitis B.C

- DM

- **Past Dental History**

- prosthodontics

- OD

- extraction

Personal History

- Oral habits related to malignancy
 - Alcohol : (-)
 - Betel quid : (-)
 - Cigarette : (-)

Intraoral Examination on 8/4

- A dome-shaped swelling mass with smooth surface, measured approximately 0.6 x 0.6 cm in diameter located between the midline of hard palate and 1.5cm palatal to tooth 17; posterior to the junction between hard palate and soft palate
- Sessile base , bluish surface color with soft consistency
- long-span prosthesis from 21to17 23to27
- Gingival inflammation and swelling of tooth 17

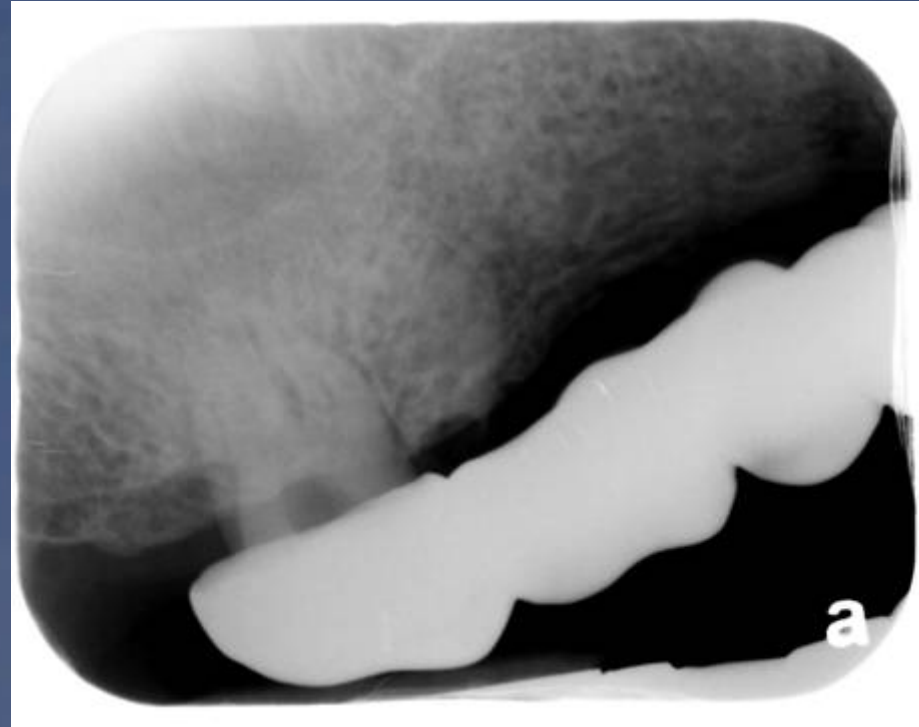


Oral & maxillofacial Examination

- Pain (-)
- Tenderness(-)
- Swelling (+)
- Fixed (+)
- Bleeding tendency (-)
- Induration (?)
- Fever or local heat (-)
- Lymphadenopathy (-)

Radiographic Examination-periapical film

ill-fitting long span crown and bridge with distal abutment 17 PDL space widening and suspected incomplete endodontic treatment



14 to 16 edentulous area with normal alveolar bone resorption
unhealed 14 extraction socket

Inflammation or cyst or neoplasm

- Redness (-)
- Swelling (+)
- Fever (-)
- Pain (-)
- Tenderness (-)
- Flucturation (-)
- Fixed (+)
- Bluish (+)
- Found the lesion for 2 weeks

Neoplasm

Benign or malignant

- Smooth surface
- soft
- Pain (-)
- Tenderness (-)
- Induration (-)
- Fixed (+)
- LAP (+)

Benign

- **Intrabony or peripheral**

- No evidence of bony destruction
- Main lesion is a submucosa lesion

peripheral

Neoplasm

Inflammation

Benign

malignant

- 1. Pleomorphic adenoma
- 2. Warthin`s tumor

- 1. Mucoepidermoid carcinoma (low-grade)
- 2. PLGA

Working diagnoses

1. Pleomorphic adenoma
2. Mucoepidermoid carcinoma (low-grade)

Pleomorphic adenoma v.s. Our case

	Pleomorphic adenoma	Our case
Gender	Female (slight predilection)	male
Age	Any age(30-50y/o)	51 y/o
Size	variable	0.6*0.6 cm
Site	Posterior lateral aspect of palate	R't hard palate
Shape	Dome-shaped	Dome-shaped
Margin	Well-defined	Well-defined

pleomorphic adenoma



Our case

Ps : parotid gland (53-77%)

submandibular gland (44-68%)

minor salivary gland (38-43%)

- palate(60%) ,upper lip(20%) ,buccal mucosa(10%)

Pleomorphic adenoma v.s. Our case

	Pleomorphic adenoma	Our case
Consistency	firm	Soft
Color	normal	Blue to reddish
Fever or local heat	-	-
Lymphadenopathy	-	+
Fluctuation	-	-
Ulcer	+/- (trauma)	-
Pain	-	-
Induration	-	-
Tenderness	-	-
Mobility	fixed	-

Pleomorphic adenoma v.s. Our case

	Pleomorphic adenoma	Our case
Surface	smooth	Smooth
Duration	Many month or years ,slowly growing	found lesion 2 weeks ago

mucoepidermoid carcinoma v.s. Our case

	Mucoepidermoid carcinoma	Our case
Gender	Slight female predilection	male
Age	2 nd to 7 th decade	51 y/o
Size	variable	0.6*0.6 cm
Site	Most in parotid gland, 2 nd in minor salivary gland (hard palate)	R't hard palate
Shape	Dome-shaped	Dome-shaped
Margin	Well-defined	Well-defined
Consistency	Soft to firm	Soft
Color	Blue or red color	Blue to reddish



mucoepidermoid carcinoma



Our case

mucoepidermoid carcinoma v.s.

Our case

	Mucoepidermoid carcinoma	Our case
Fever or local heat	-	-
Lymphadenopathy	-	+
Fluctuation	Sometimes	-
Ulcer	-	-
Pain	-	-
Induration	-	-
Tenderness	-	-
Mobility	-	-
Surface	Smooth	Smooth
Duration	Aware for the lesion for 1 yr or less	found lesion 2 weeks ago

Clinical impression

Pleomorphic adenoma
over right hard palate

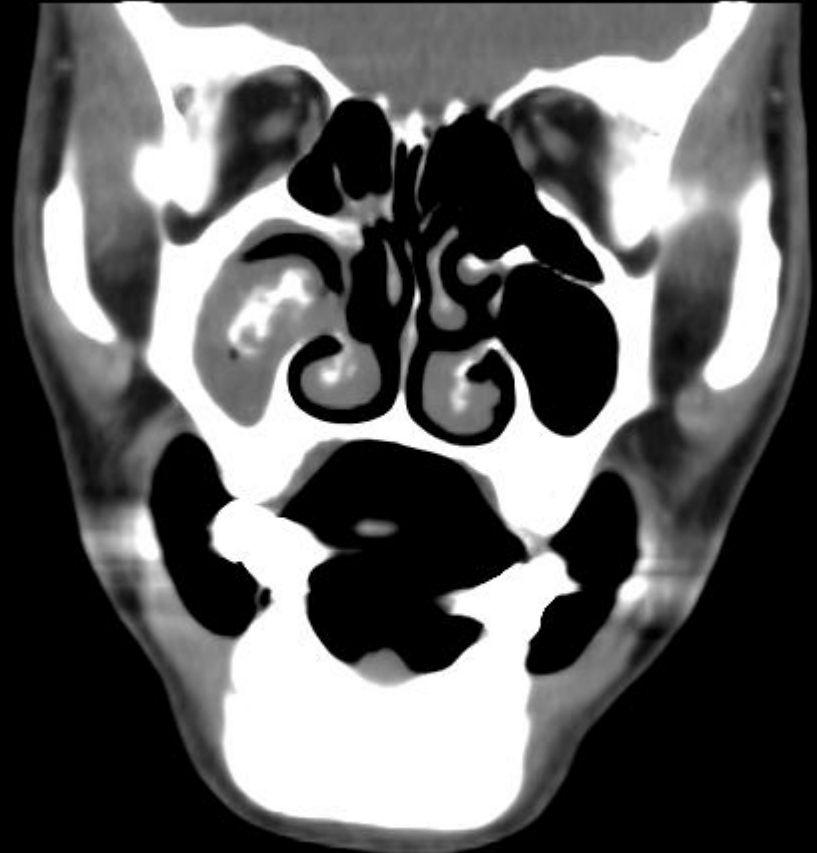
Treatment plan

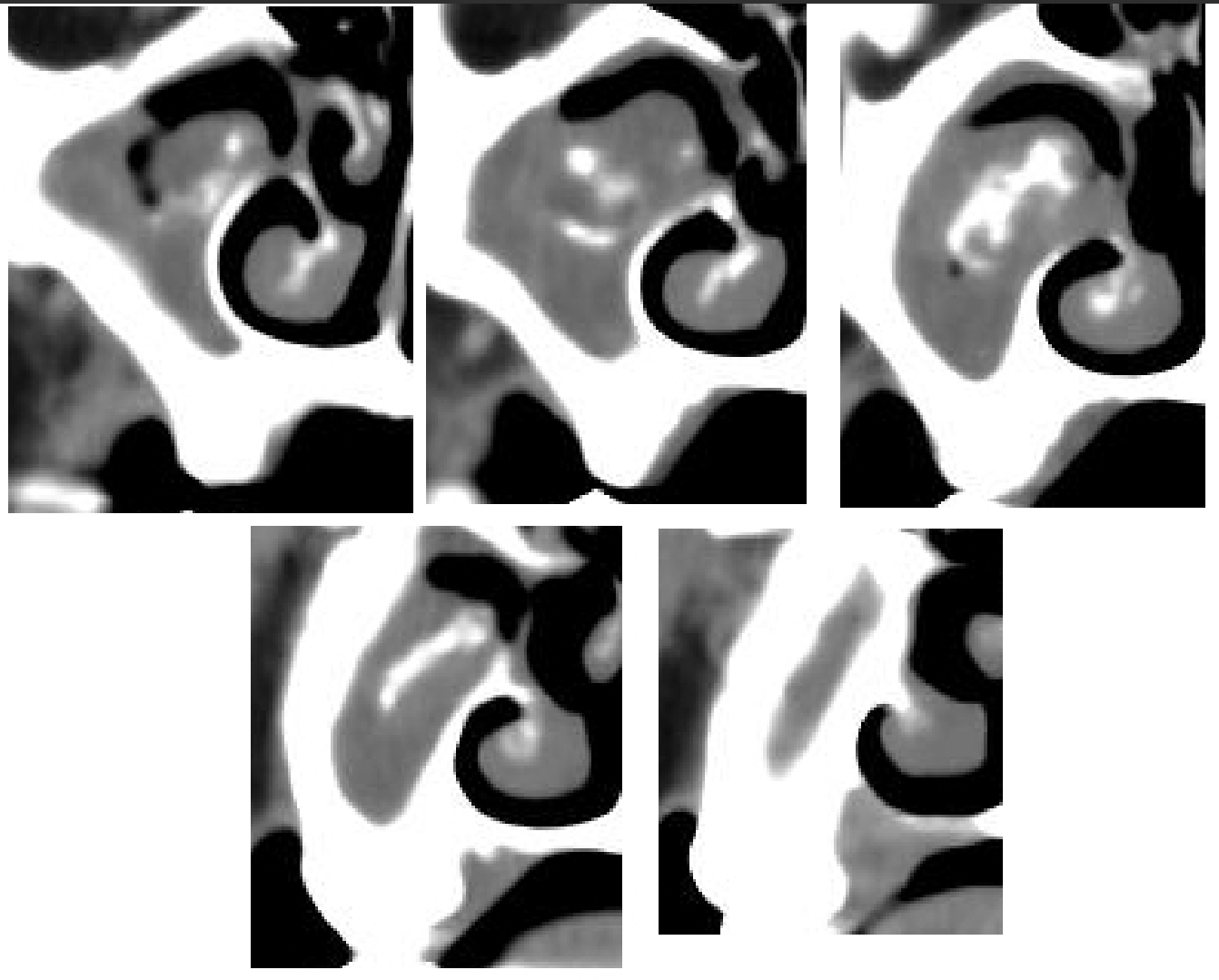
- 96/08/06:
 - Imp : mucocele by OS doctor 沈
 - Incisional biopsy
- 96/08/17
 - Arrange CT scan

Radiographic Examination-CT coronal view(96.08.20)

This coronal CT image showing R't maxillary sinus is filled with a void-shaped radiopacity substance with central calcification, measuring about 4x4cm in diameter.

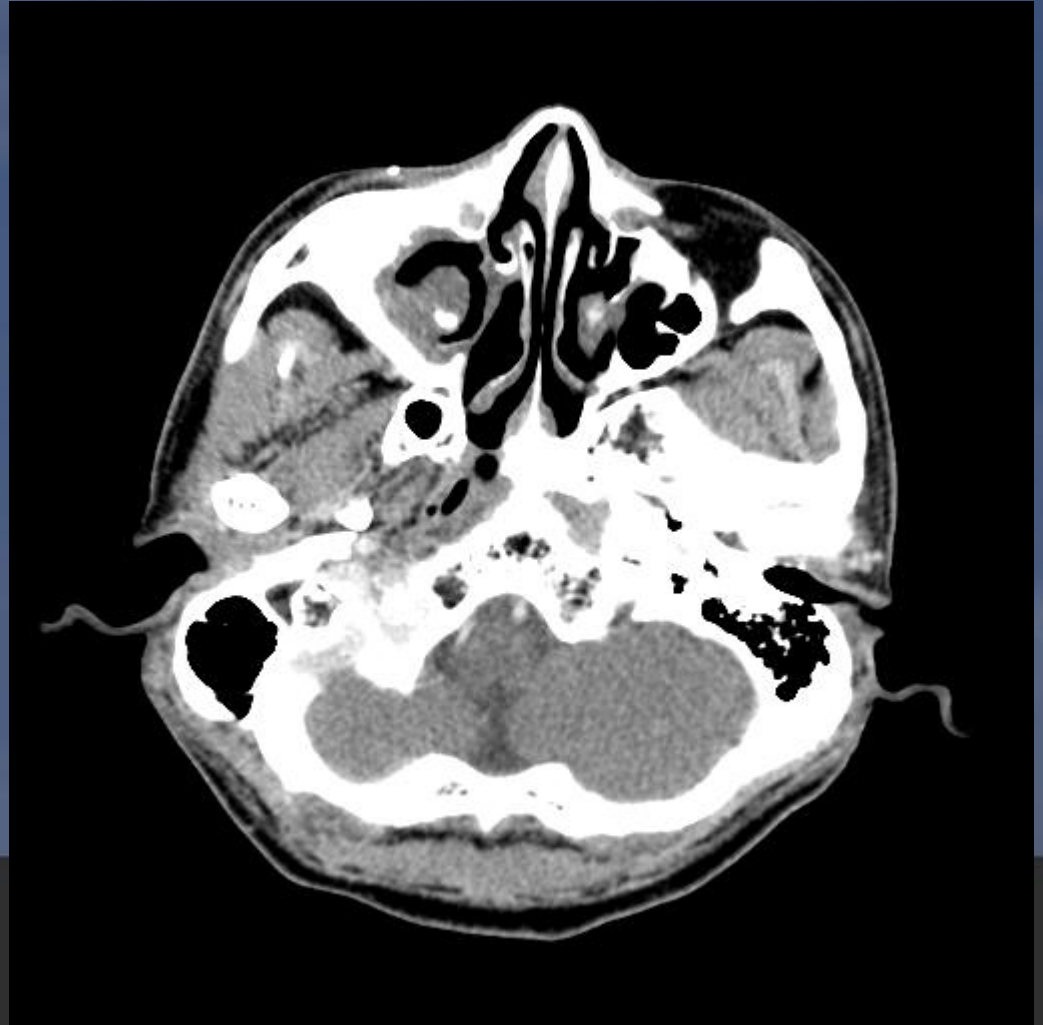
No bony destruction through inferior wall of the maxillary sinus



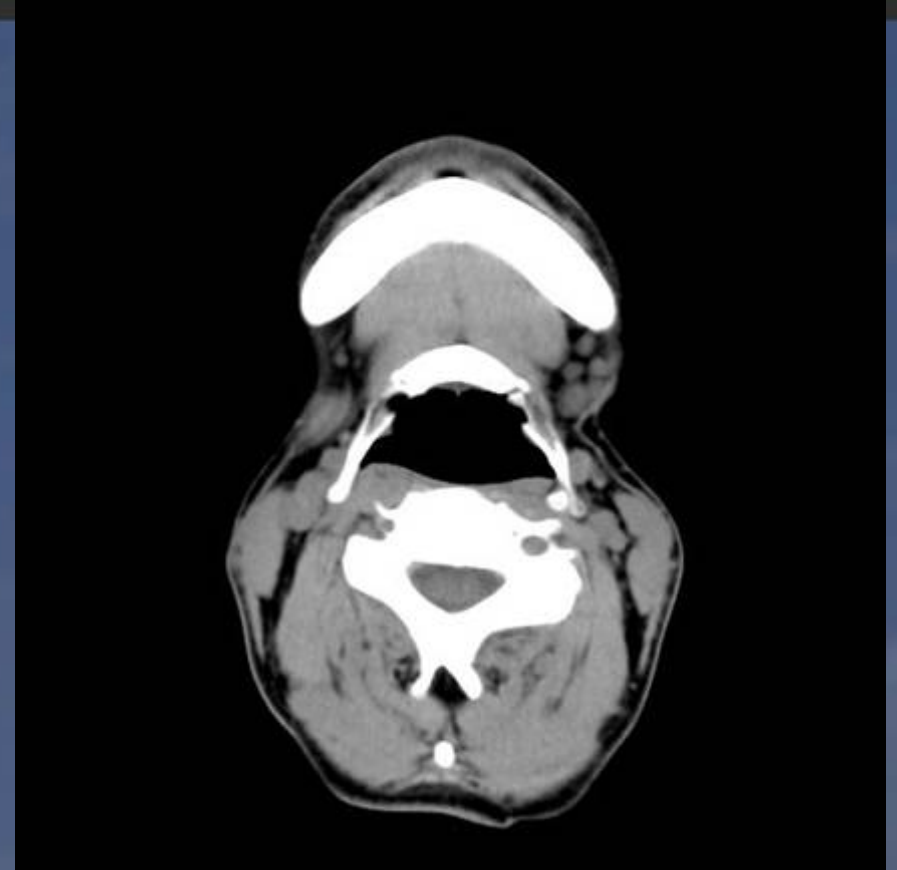
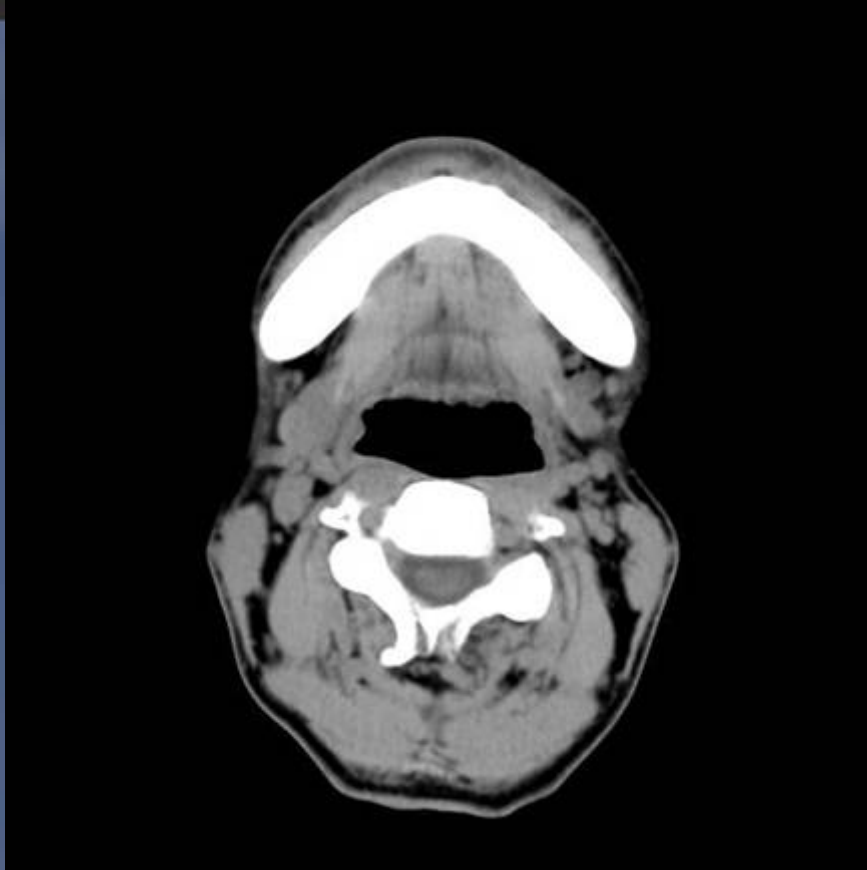


Radiographic Examination-CT axial view (96.08.20)

The axial CT image shows that there is a polypoid-shaped radiopaque within right maxillary sinus.



Radiographic Examination-CT axial view in neck (96.08.20)

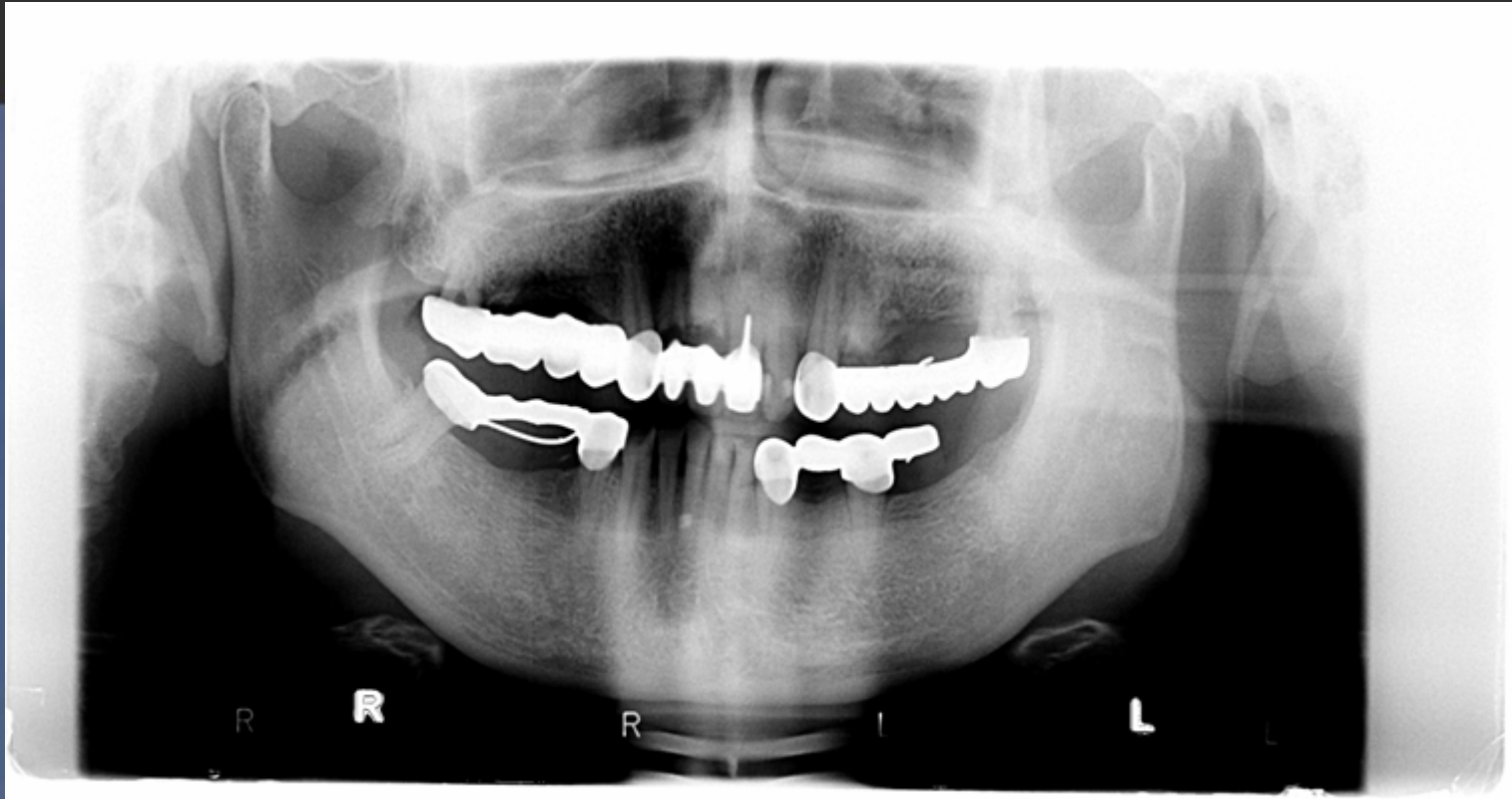


This axial CT image shows that there are several lymph nodes over bilateral submandibular and submental area, measuring about 1cm in diameter

Treatment plan - cont.

- 96/08/20
 - HP report : mucoepidermoid carcinoma, hard palate, R't
- 96/08/27
 - GA general routine

Radiographic Examination (96.08.27)



In this film , nothing particular and no bony destruction relative to the lesion found in hard palate. Radiographic burnout is noticed in both side of maxillary area, lower boarder of R't maxillary sinus drop down than L't side.

Other dental findinds

C&B : 2111213xxx17, 2324xx27, 33x35x,44xx47

RR : 11,12,24 suspected fracture : 24 caries : 42.43

Treatment plan - cont.

- 96/09/02
 - Operation:
Hemimaxillectomy, R't

Thanks for your attention