

Intern Case Report

Intern C組：施函緯、林聰緯、柯昭賢、黃慷慧

報告日期：100.11.28

指導醫師：口病科全體醫師

General Data

- Name: 林XX
- Gender: Female
- Age: 37 y/o
- Native: Kaohsiung
- Marital status: Not married
- Birthday: 63.03.29
- First visit: 100.11.11
- Attending VS: 陳靜怡醫師

Chief Complaint

- Pain and swelling over left mandible for 2 weeks.

Present Illness

- This 37 y/o female felt uncomfortable over lower left anterior to posterior teeth for 3 weeks. She didn't care about it until the swelling was noted 2 weeks ago. She visited 大華牙科 on 100.11.11. After dental X-ray examination at 大華牙科, a lesion over left mandible was found. She was referred to our OPD for further evaluation.

Extraoral Examination

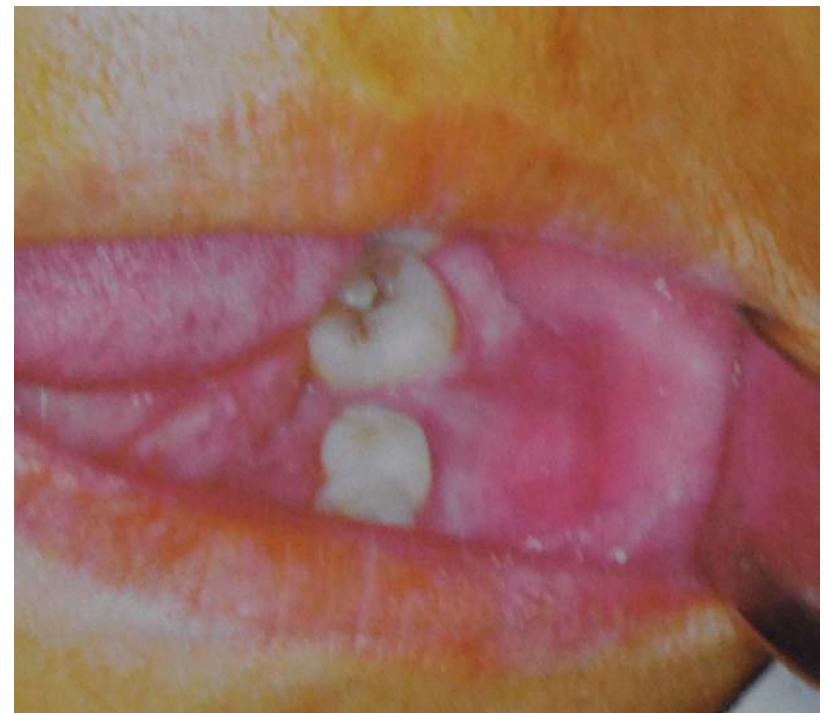
● Facial swelling over left mandible body

- Consistency: Firm to hard
- Redness: (-)
- Local heat: (-)
- Pain: (+)
- Numbness: (-)

Intraoral Examination

- Gingival swelling and ridge expansion from tooth 32 to 37

- Size: 8x4 cm
- Color: Pink
- Consistency: Firm to hard
- Fluctuation: (-)
- Induration(-)
- Pain: (+)
- Tenderness: (+)



Intraoral Examination

- Mobility grade II : $\begin{array}{c|cc} & 4 & 5 \\ \hline & & \end{array}$
- Mobility grade I : $\begin{array}{c|cc} & 7 & 8 \\ \hline & & \end{array}$
- Residual root: $\begin{array}{c} \top \\ 6 \end{array}$
- EPT(+): $\begin{array}{c|ccccccc} 3 & 2 & 1 & | & 2 & 4 & 5 & 7 & 8 \\ \hline \end{array}$
- EPT(-): $\begin{array}{c} \top \\ 1 & 3 \end{array}$

Past History

- Past medical history

- Denied any systemic disease
- Denied any drug and food allergy

- Past dental history

- OD
- Scaling

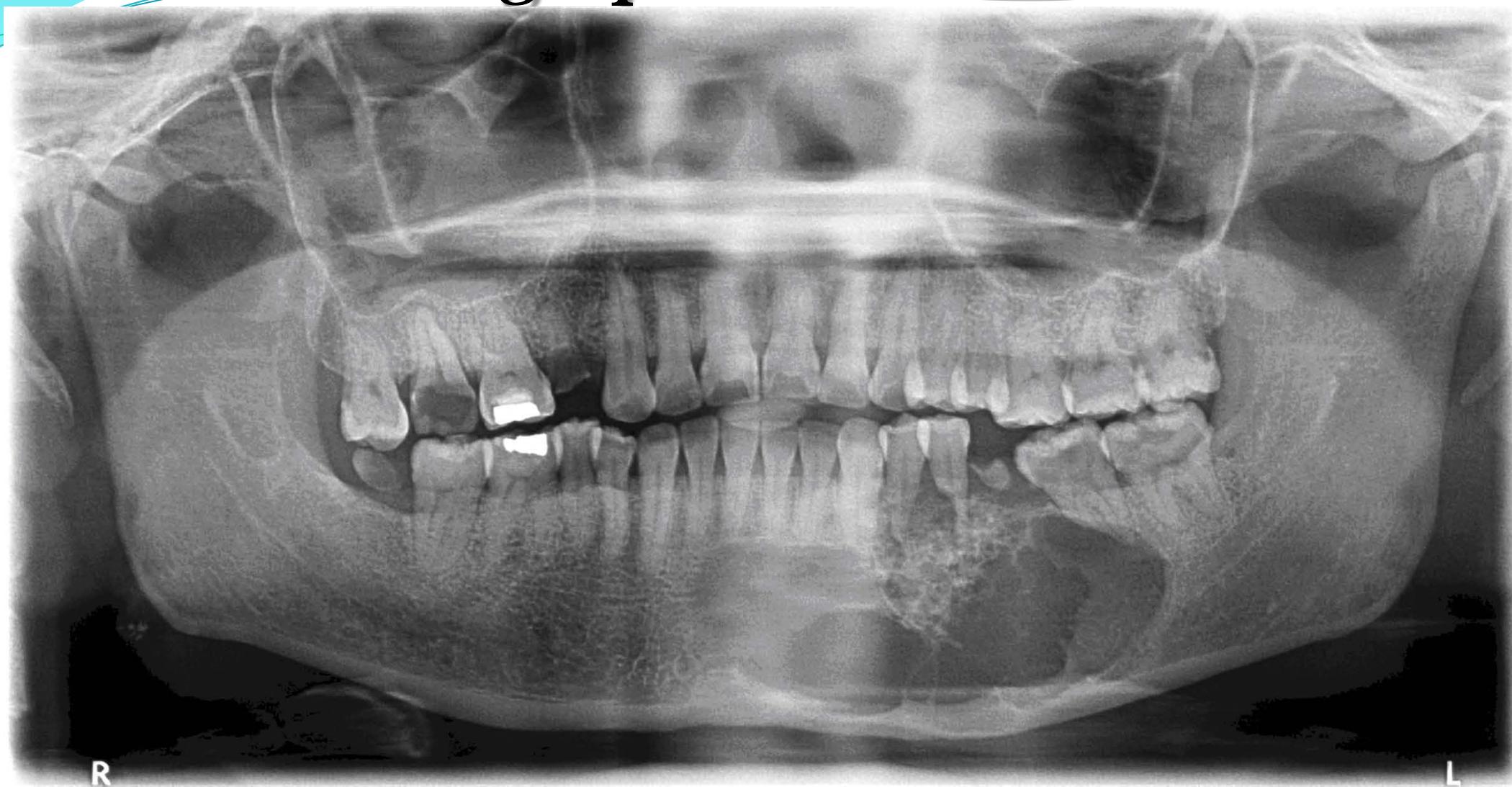
Personal History

- Oral risk factors:
 - Alcohol drinking: (-)
 - Betel nut chewing: (-)
 - Cigarette smoking: (-)
- Denied other specific oral habits
- Attitude toward dental treatment: Cooperative

Dental Examination

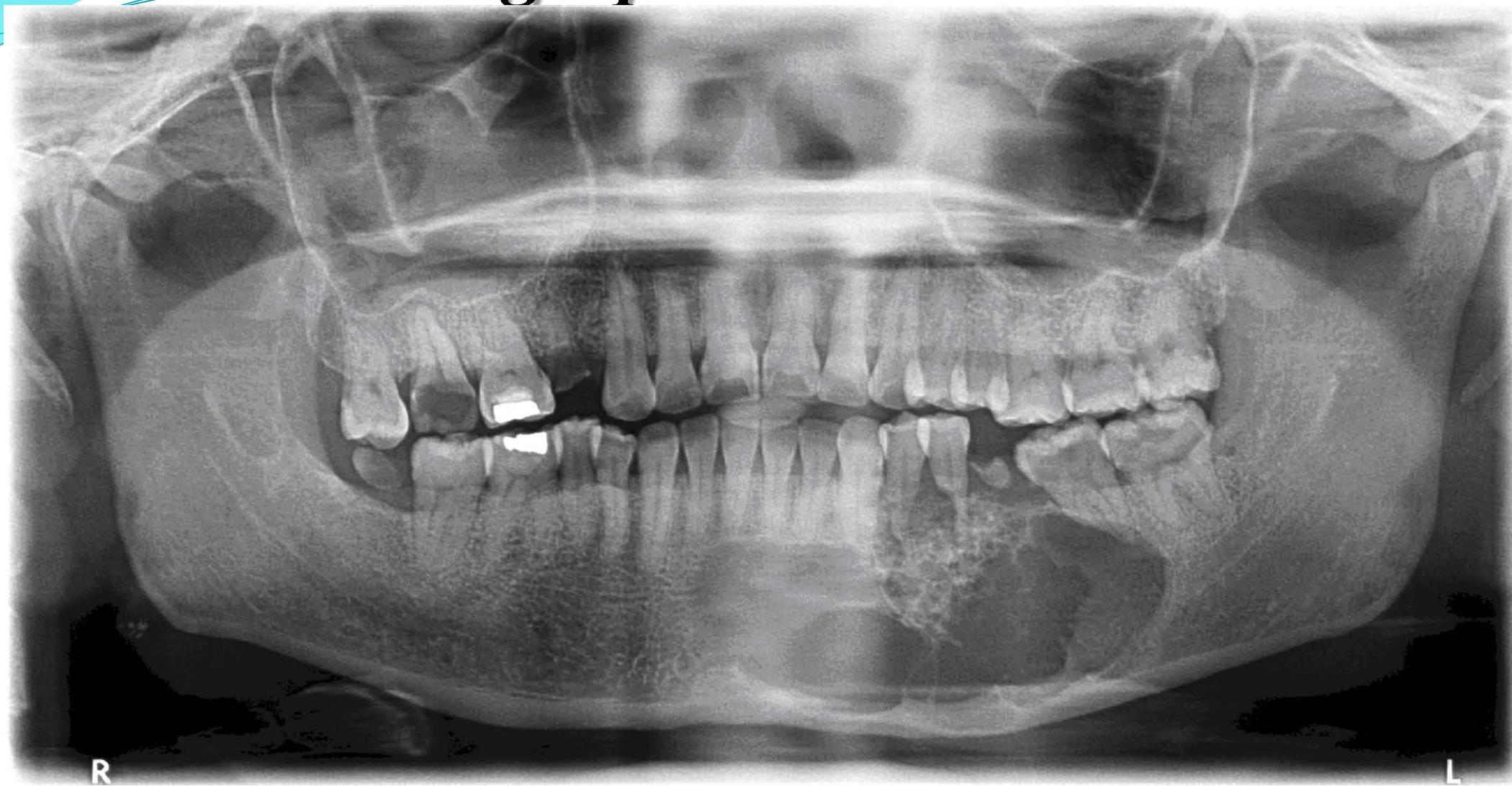
- Missing: $\frac{4}{\rule{0.5cm}{0.4pt}}$
- Caries: $\frac{7}{\rule{0.5cm}{0.4pt}}$
- Residual root: $\frac{4}{8} \quad \frac{}{+} \quad \frac{6}{\rule{0.5cm}{0.4pt}}$
- Amalgam filling: $\frac{6}{6} \quad \frac{}{+} \quad \frac{}{\rule{0.5cm}{0.4pt}}$

Radiographic Examination



- Pano: There is a well-defined, not corticated, multilocular, scalloped radiolucency over left mandible body and symphysis, extending from the apex of tooth 42 to the distal side of tooth 37 and from alveolar crest to inferior border of mandibular body, measuring 7x3 cm. There is bony expansion of alveolar crest and mandibular border in vertical direction.

Radiographic Examination



Left mandibular canal is downward displaced, with intact cortical bone.

Root resorption of tooth 34, 35, 37 is noted.

Radiographic Examination



- Occlusal: There is a well-defined, soap-bubble, multilocular radiolucency extending from tooth 32 to the posterior area. Buccal-lingual bony expansion is noticed. Suspect tooth 34 35 buccal version.

Radiographic Examination



- Periapical: There is a well-defined, multilocular, soap-bubble radiolucency extending from the mesial side of tooth 42 to the distal side of tooth 37. Root resorption of tooth 31, 32, 33, 34, 35, 37 is noted.

Differential Diagnosis

- Inflammation, cyst or neoplasm?
- Benign or malignant?
- Peripheral or intrabony?

Inflammation, Cyst or Neoplasm?

- Pain: (+)
- Redness: (-)
- Local heat: (-)
- Bony destruction and expansion: (+)

—————> Cyst or neoplasm

Benign or Malignant?

- Pain(+), tenderness(+)
- Well-defined border
- EPT(+) over teeth on the lesion expanded area
(except tooth 31, 33)

—————> Benign

Peripheral or Intrabony?

- Bony expansion with a well-defined border.

→ Intrabony

Working diagnosis

Intrabony benign tumor or cyst

Benign Tumor

- Odontogenic
 - ✓ Ameloblastoma
 - ✓ Odontogenic myxoma
 - ✓ Ameloblastic fibroma

Working diagnosis

Intrabony benign tumor or cyst

- Non-odontogenic Tumor
 - ✓ Central hemangioma
 - ✓ Central giant cell granuloma

Cyst

- Odontogenic keratocyst (Keratocystic odontogenic tumor)

Working diagnosis

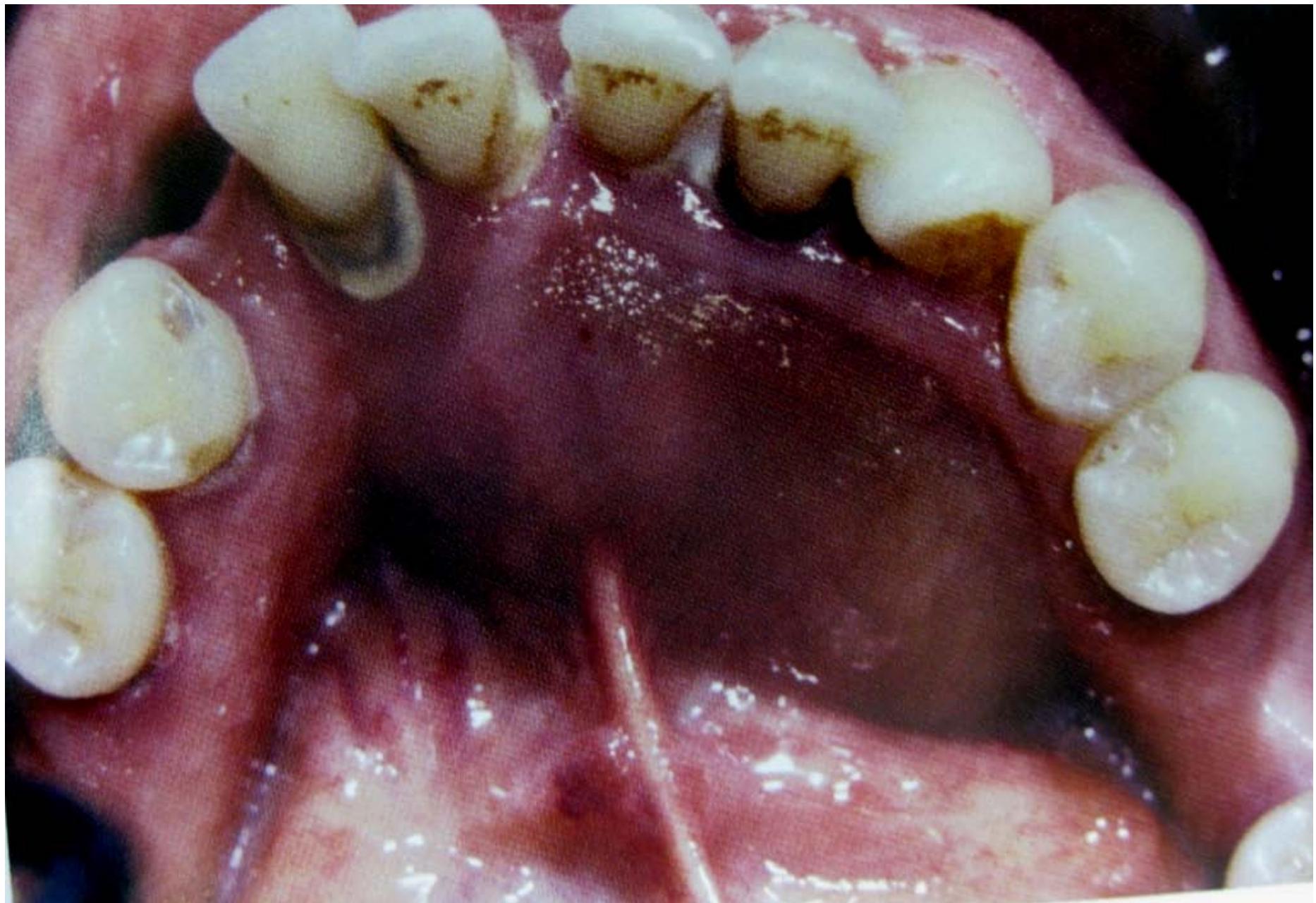
The List(more possible → less)

- Ameloblastoma
- Odontogenic keratocyst
- Odontogenic myxoma
- Ameloblastic fibroma
- Central giant cell granuloma
- Central hemangioma

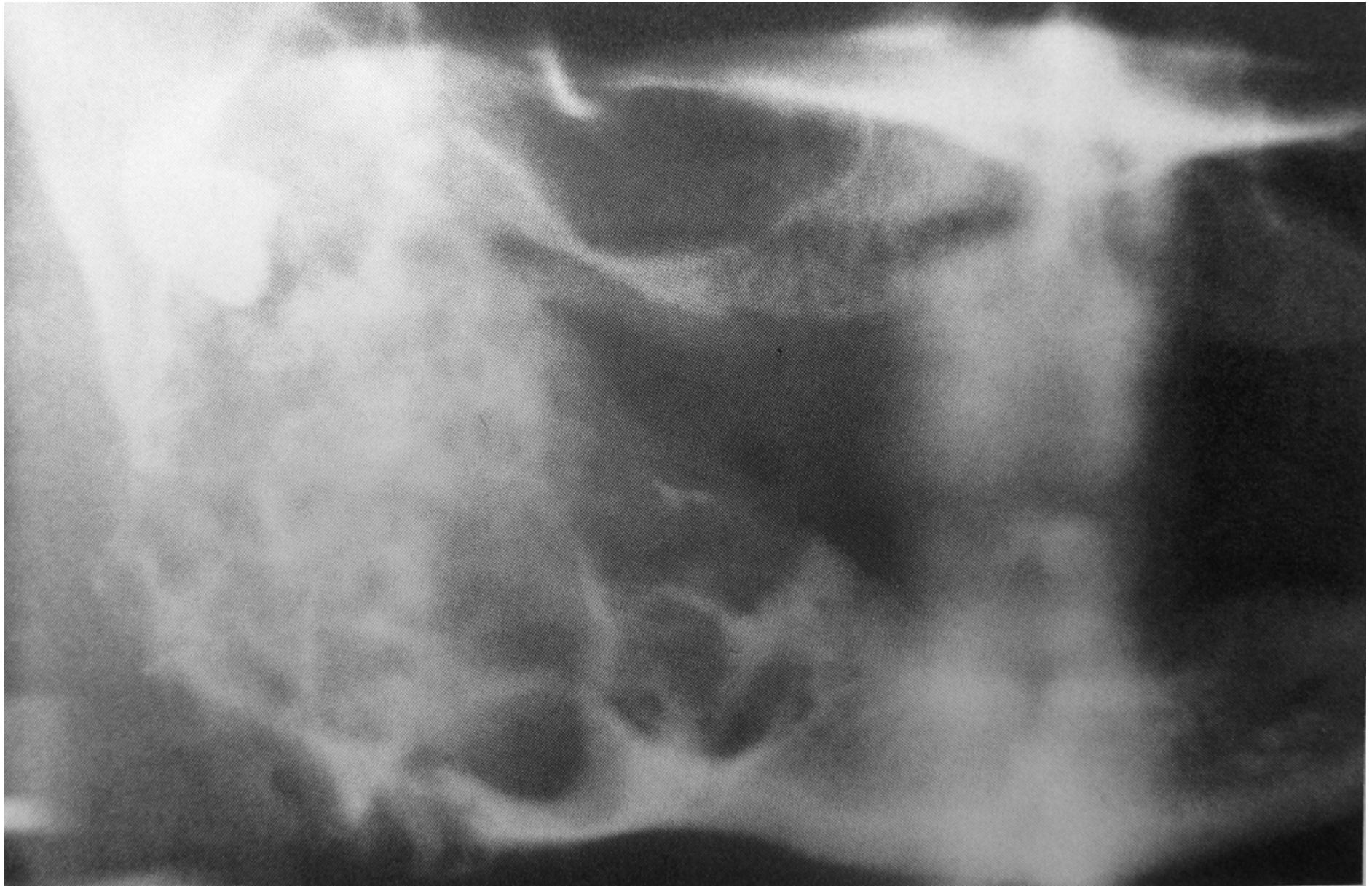
Ameloblastoma

	Our Case	Ameloblastoma
Gender	Female	Both
Age	37 y/o	30~70 y/o
S / S	Painful swelling	Painless swelling
Site	left mandible body and symphysis	80% posterior mandible
Shape	Multilocular, soap-bubble	Multilocular, distinct septa, Rarely honeycomb or soap-bubble
Size	8x4 cm	variable
Outline	Well-defined	Smooth and scalloped, well-defined, well-corticated
Effects	Bone expansion, root resorption	Adjacent teeth displaced, loosened, often resorbed, extensive expansion in all directions

Ameloblastoma



Ameloblastoma



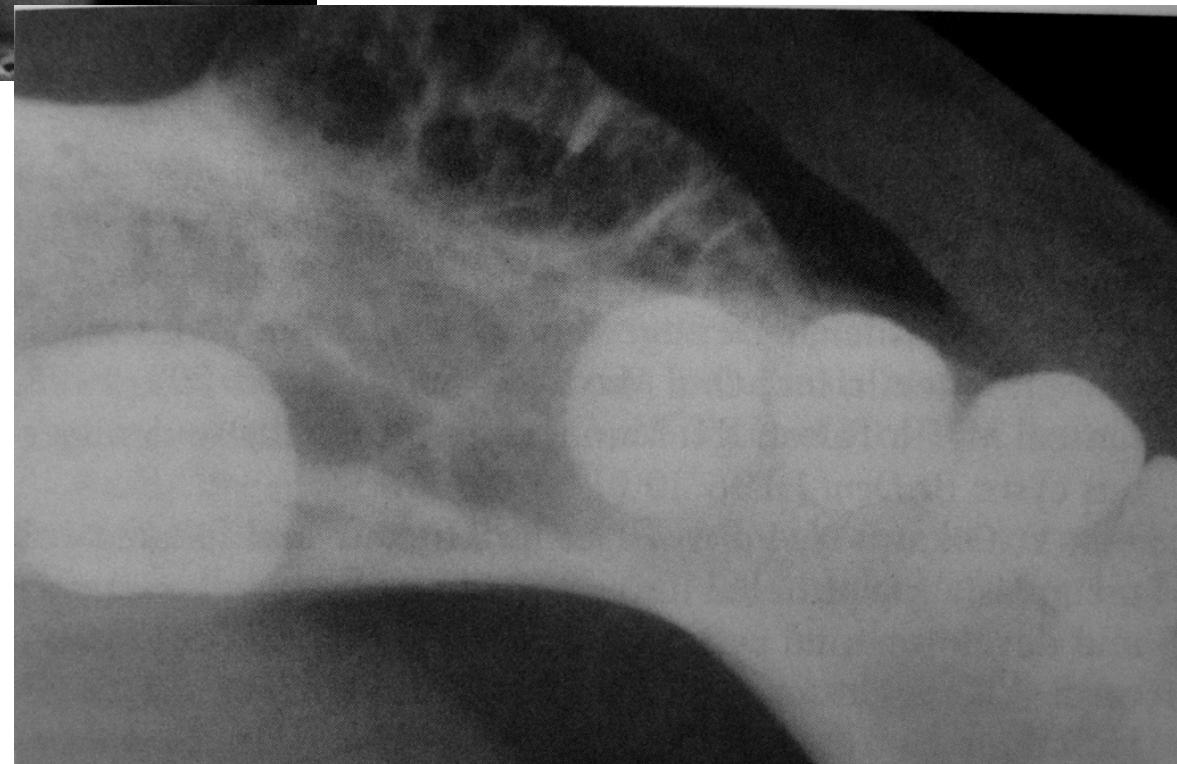
Odontogenic Keratocyst

	Our Case	OKC
Gender	Female	Male slightly higher
Age	37 y/o	60% 10~40 y/o
S / S	Painful swelling	Large→pain, swelling, drainage
Site	left mandible body and symphysis	60~80% posterior mandible
Shape	Multilocular, soap-bubble	Multilocular
Size	8x4 cm	Variable
Outline	Well-defined	Well-defined, smooth, corticated margin
Effects	Bone expansion, root resorption	25~40% unerupted tooth, rare root resorption



Odontogenic Myxoma

	Our Case	Odontogenic Myxoma
Gender	Female	Both
Age	37 y/o	Mean age 25~30 y/o
S / S	Painful swelling	Painless expansion
Site	left mandible body and symphysis	Mandible
Shape	Multilocular, soap-bubble	Unilocular or multilocular with “stepladder pattern trabeculae” or “soap-bubble”
Size	8x4 cm	Variable
Outline	Well-defined	Irregular or scalloped
Effects	Bone expansion, root resorption	Tooth displacement, resorption



Ameloblastic Fibroma

	Our Case	Ameloblastic Fibroma
Gender	Female	Male slightly more
Age	37 y/o	Mean age 14 y/o
S / S	Painful swelling	Painless swelling
Site	left mandible body and symphysis	Posterior mandible
Shape	Multilocular, soap-bubble	Multilocular
Size	8x4 cm	variable
Outline	Well-defined	Smooth, well-defined
Effects	Bone expansion, root resorbtion	Adjacent teeth displaced, buccal-lingual expansion of jaw, 75% associated with unerupted tooth



Journal of Oral and Maxillofacial Pathology
Case Report

Ameloblastic fibroma in six-year-old male: Hamartoma or a true neoplasm

Chhavi Jindal, Reena Sarkar Bhola

Department of Oral and Maxillofacial Pathology, National Dental College and Hospital, Derabassi, Mohali, Punjab, India

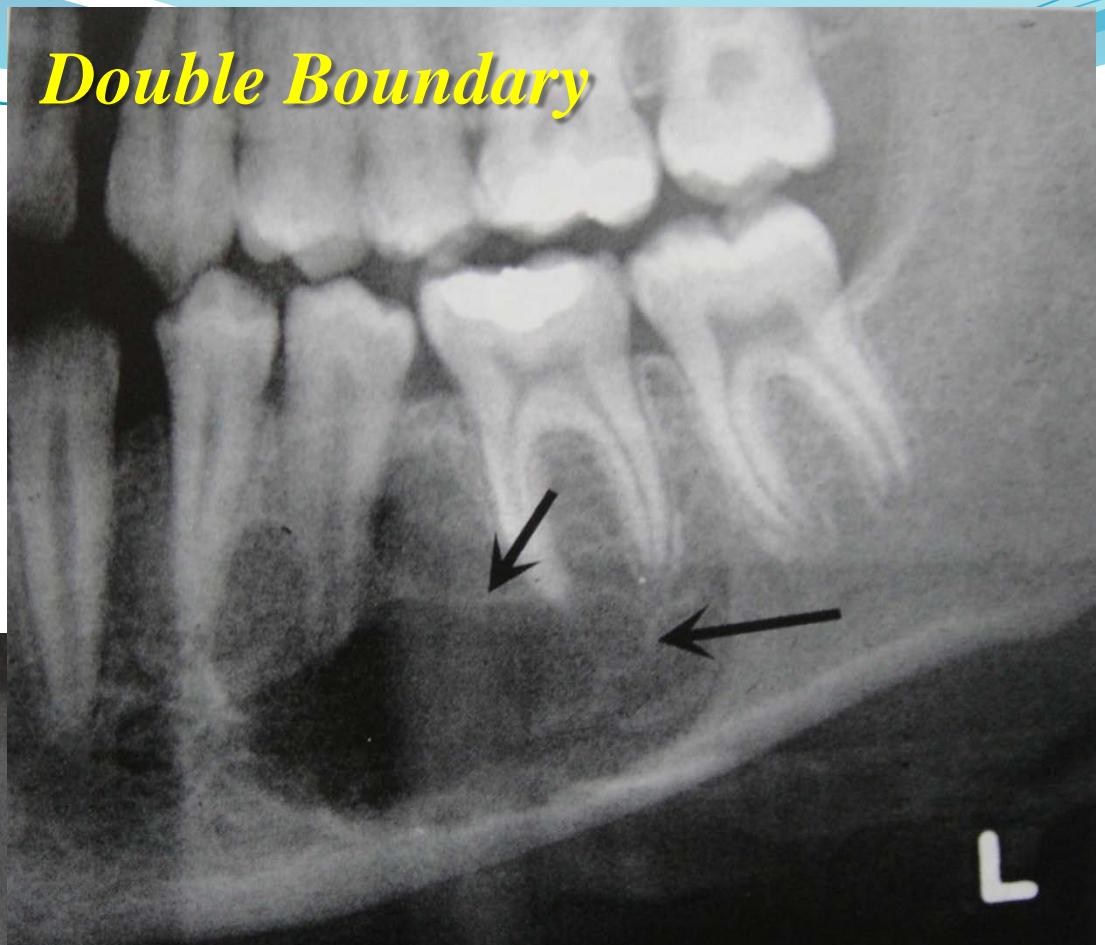
Central Giant Cell Granuloma

	Our Case	CGCG
Gender	Female	Female
Age	37 y/o	<30 y/o (60% < 20 y/o)
S / S	Painful swelling	Painless swelling
Site	left mandible body and symphysis	Ant. to the first molar in mand. Cross mid-line
Shape	Multilocular, soap-bubble	Multilocular, soap-bubble, occasionally distinct septa,
Size	8x4 cm	variable
Outline	Well-defined	well-defined, scalloped, non-corticated
Effects	Bone expansion, root resorption	Adjacent teeth displacement, bone expanded unevenly scalloped boarder double boundary in occlusal films

Cross mid-line



Double Boundary



Distinct septa



Central Hemangioma

	Our Case	Central Hemangioma
Gender	Female	M:F=1:2
Age	37 y/o	10~20 y/o
S / S	Painful swelling	Local gingival bleeding, pain
Site	Left mandible body and symphysis	Mandible body and ramus
Shape	Multilocular, soap-bubble	Multilocular; honeycomb or soap-bubble
Size	8x4 cm	variable
Outline	Well-defined	Ill-defined, indistinct margin
Effects	Bone expansion, root resorption	Rare tooth displacement and root resorption

Clinical Impression

- Ameloblastoma over left parasymphysis and mandibular body
- Odontogenic keratocyst over left parasymphysis and mandibular body

References

- Essentials of Dental Radiography and Radiology, 4th ed.
- Oral and Maxillofacial Pathohlogy, 3rd ed.
- Differential Diagnosis of Oral and Maxillofacial Lesions, 5th ed.
- Oral Radiology, 6th ed.

Discussion

- Histologic pathology
- Aspiration