



# Case Report

D93 Intern-J

組員：胡士文 林正屏

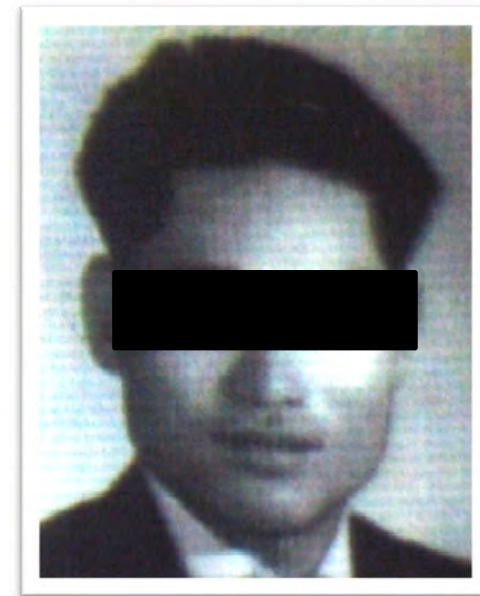
陳詠真 賴睿聲

指導醫師：

陳玉昆主任 王文岑醫師 林立民教授

# General Data

- Name : 鄔○來
- Gender : Male
- Age : 74 歲
- Occupation : 無
- Attending V. S. :  
陳玉昆醫師
- First visit : 98/6/29



# Chief Complaint

An exophytic mass over lower anterior area.





## **Present Illness**

This 74-year-old male patient has suffered from an exophytic mass with white patches over lower anterior area. He went to LDC for help and was suggested to come to our OPD for further examination and treatment.

# Past History

## Past Medical History

- ❑ Drug allergy: Denied
- ❑ Taking drug: Medicine for heart disease
- ❑ Systemic disease: Renal dysfunction, hepatitis, myocardio infarction
- ❑ DM: Denied
- ❑ Hypertension: Denied

## Past Dental History

- ❑ Metal bridge fabrication, extraction



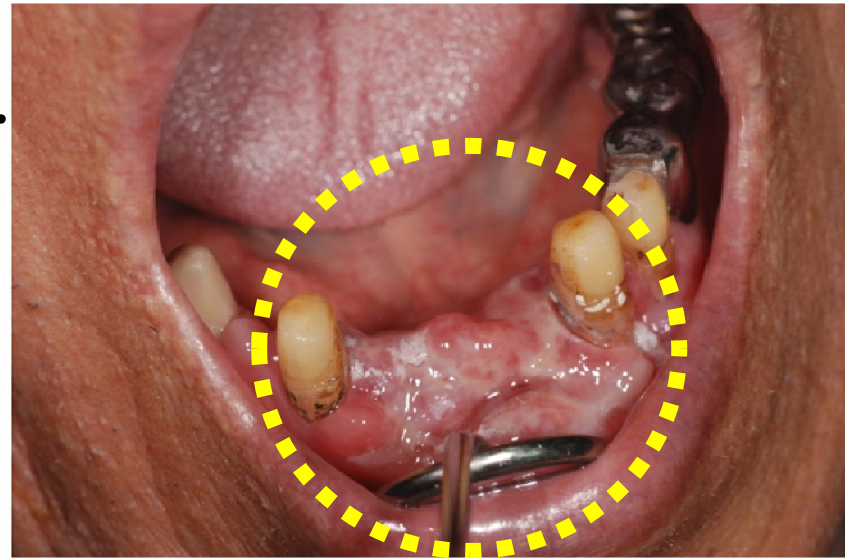
# Risk Factors

- ❑ Alcohol : (–)
- ❑ Betel quid : (–)
- ❑ Smoking : (–)



# Intraoral Examination

There is an exophytic mass with rough surface white patches over lower anterior vestibular and alveolar ridge (tooth 35-43), measured about 2.0×5.0 cm in diameter.



# Physical Examination

- ❑ Mobility: Fixed
- ❑ Consistency: Firm
- ❑ Surface: Rough
- ❑ Fluctuation (-)
- ❑ Pain (-)
- ❑ Tenderness (-)
- ❑ Induration (+)
- ❑ Lymphadenopathy (+)
- ❑ Shape : Polypoid
- ❑ Mobility over tooth  
43(grade I ), 33(grade II ), 34(grade I )



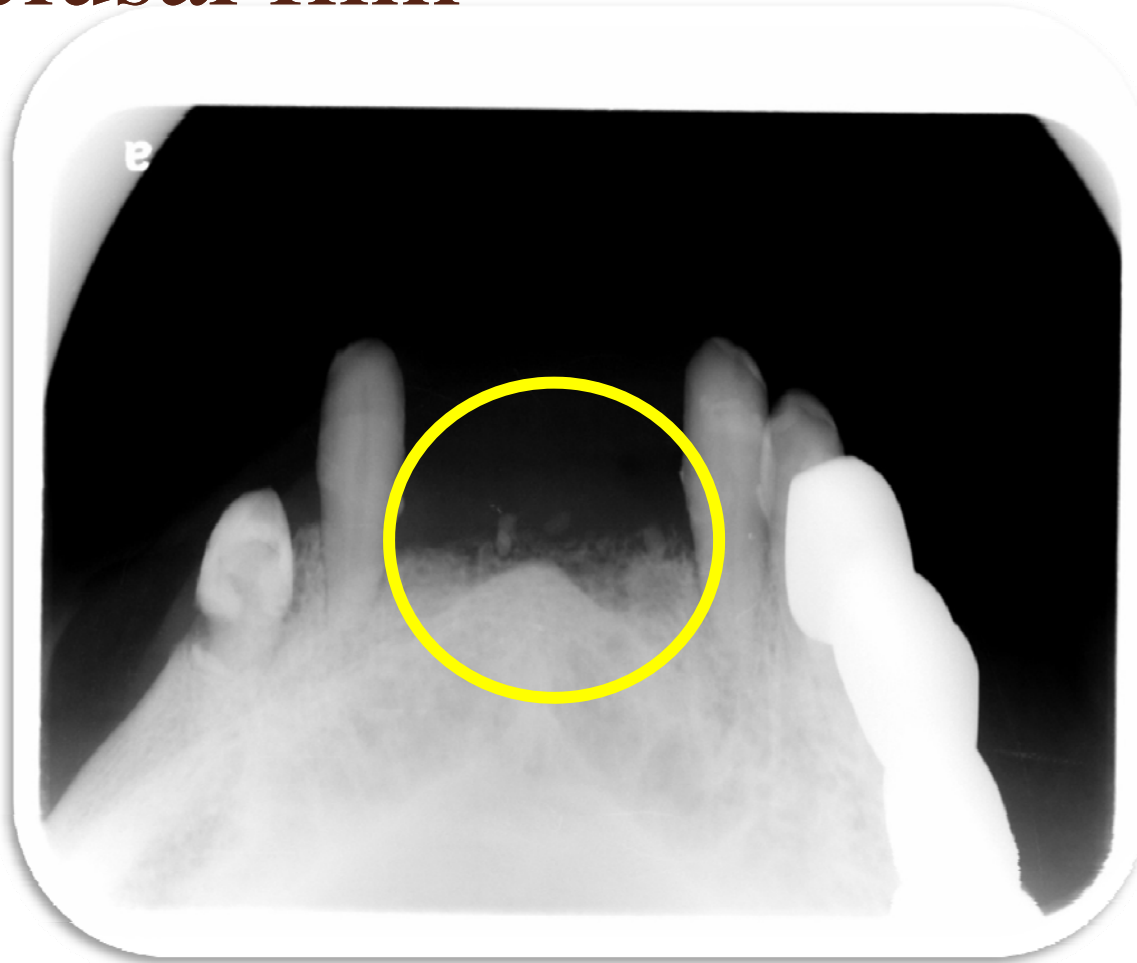
# Radiographic examination

## Panoramic film



1. Tooth missing: 12, 25, 26, 27, 36, 37, 31, 32, 41, 42, 44, 45, 46
2. Endodontic treatment: 13, 12, 21, 23, 24
3. Prosthesis: 13x25, 34x38
4. Periodontal status: 45 vertical bony destruction(M & D)

# Occlusal film



There is a poor-defined bony destruction over tooth 33 to 43, measuring 4 cm in width. The border of alveolar ridge got erosion and totally fell away and the sequestrum can be seen.

# Inflammation ? Cyst ? Neoplasm ? Infection ?

- ❑ Fever or local heat (–)
- ❑ Pain (–)
- ❑ Surface: rough
- ❑ Shape: polypoid
  - R/O inflammation & cyst
  - Infection or Neoplasm





# Infection

# Bacteria? Virus? Fungus?

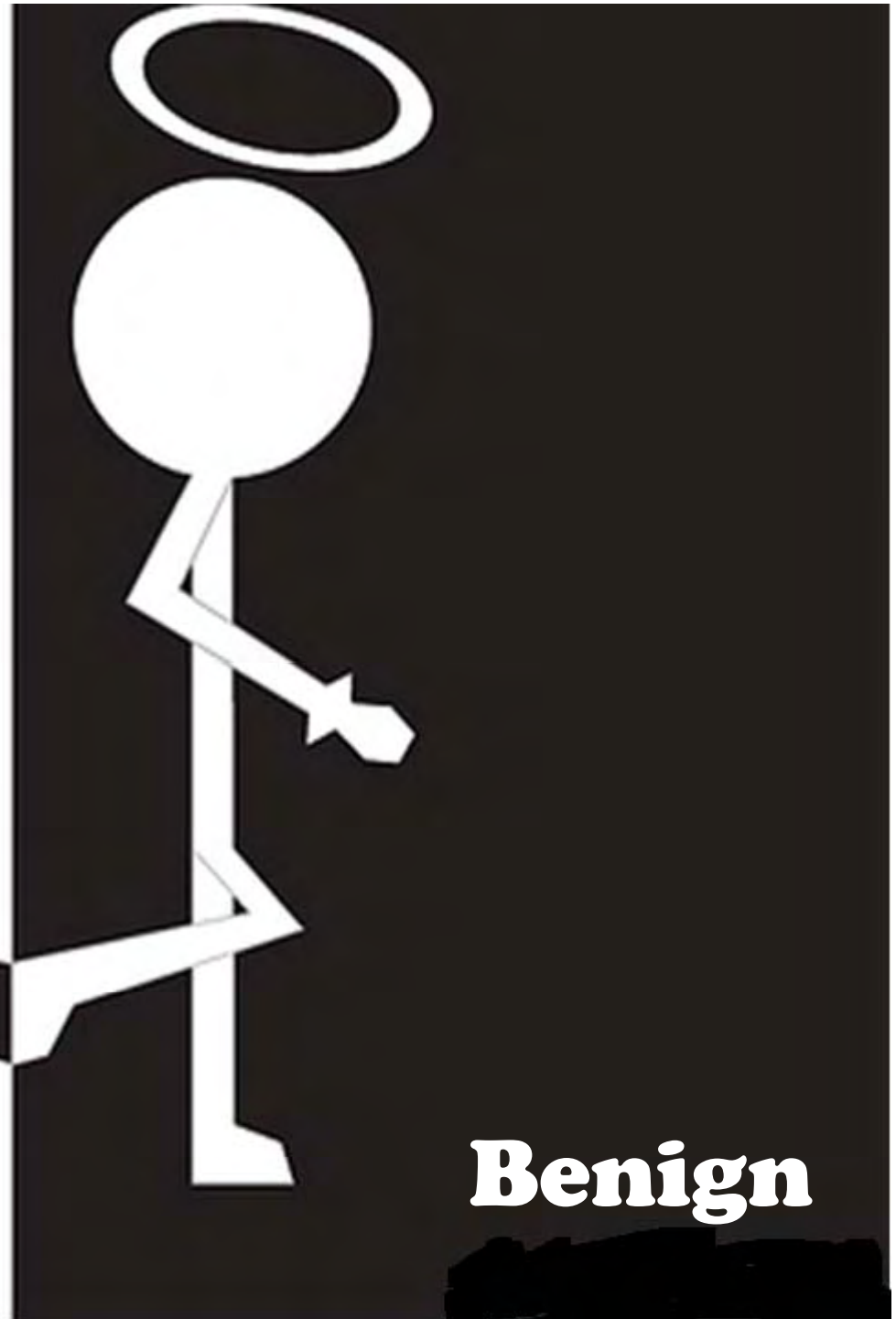
- ❑ Pain (–)
- ❑ Tenderness (–)
- ❑ Lymphadenopathy (+)
- ❑ Ulceration (+)
- ❑ Induration (+)
- ❑ Rough surface
- ❑ Poor-defined radiolucency (moth-eaten appearance)

→ Tuberculous osteomyelitis



# Neoplasm

**Malignant**



**Benign**



# Benign or Malignant ?

- ❑ Pain (-)
- ❑ Tenderness (-)
- ❑ Lymphadenopathy (+)
- ❑ Ulceration (+)
- ❑ Induration (+)
- ❑ Rough surface
- ❑ Poor-defined radiolucency

→ **Malignant** Tumor



**Malignant**



**Central**



**Peripheral**

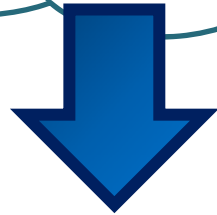


# Central or Peripheral Lesion ?

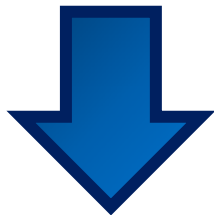
- ❑ Soft tissue lesion
- ❑ Bone destruction: up to down

→ Peripheral

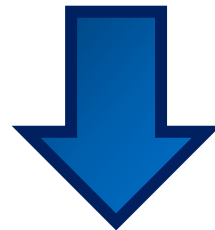
**Malignant**



**Peripheral**



**Epithelium  
origin**



**Soft tissue  
origin**



# Peripheral Malignant Tumor

- Epithelium origin

- Squamous Cell Carcinoma

- Spindle Cell Carcinoma

- Soft tissue origin

- Leiomyosarcoma

- Rhabdomyosarcoma

# Working Diagnosis

- ▣ Infection
  - Tuberculous osteomyelitis
- ▣ Peripheral epithelial malignant
  - Squamous Cell Carcinoma
  - Spindle Cell Carcinoma
- ▣ Peripheral soft tissue malignant
  - Leiomyosarcoma
  - Rhabdomyosarcoma

# Differential Diagnosis



PLAYDOUGH MAN  
ON COMPUTER

## Tuberculosis (primary oral tuberculosis)

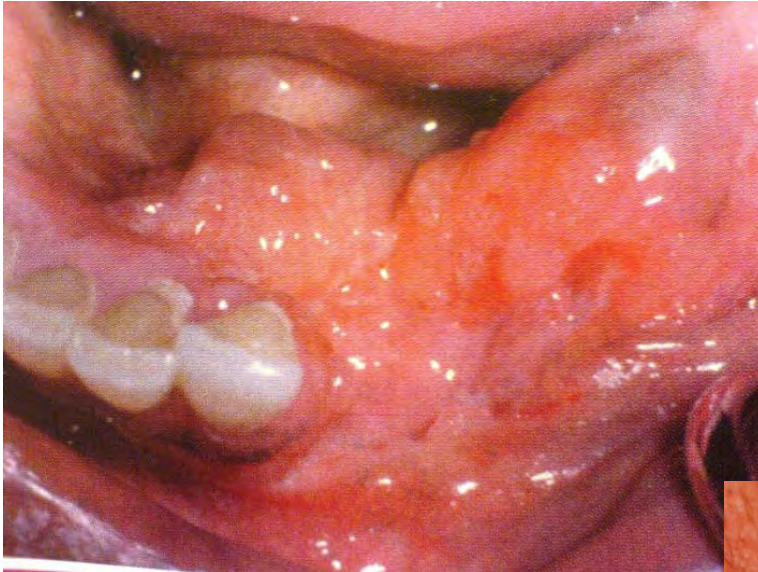
	Our Case	Tuberculosis
Gender	Male	P' t with AIDS, greater than 50% will have extrapulmonary lesions
age	74	
site	Mandible anterior gingiva	Gingival, mucobuccal fold, extraction site
X-ray appearance	Poor-defined irregular	Poor-defined areas of radiolucency
ulceration	+	+
Lymphadenopathy	+	+



註:通常primary oral lesions are usually associated with enlarged regional lymph nodes



# Tuberculous osteomyelitis



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## Our Case





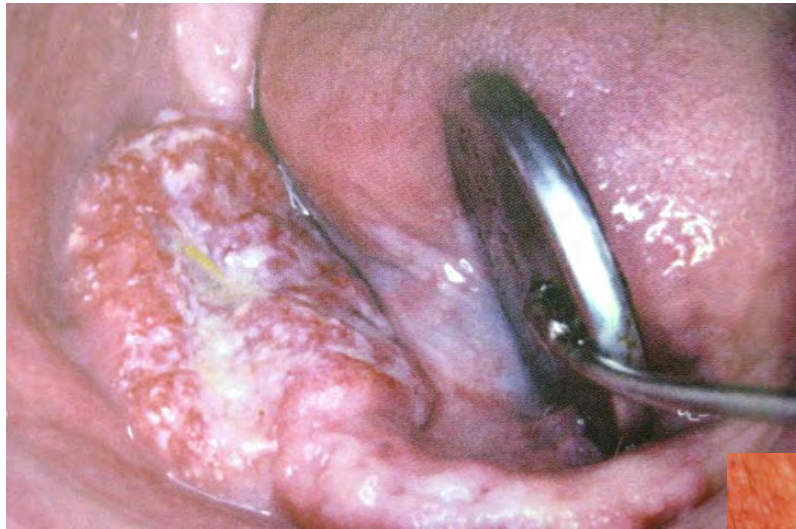
# Squamous cell carcinoma

	Our Case	Squamous cell carcinoma
Gender	Male	M>F
age	74	Older man
site	Mandible anterior gingiva	Most: Tongue(posterior lateral and ventral surfaces)
X-ray appearance	Poor-defined irregular	Poor-defined
ulceration	+	+
pain	-	-



註:如果發生在gingiva & alveolar CA 通常是painless; most common site is posterior mandible

# Squamous cell carcinoma



## Our Case



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p356

# Spindle cell carcinoma

	Our Case	Spindle cell carcinoma
Gender	Male	M=F
age	74	Mean age: 57 y/o
site	Mandible anterior gingiva	Lower lip, lateral posterior tongue , and alveolar ridge
X-ray appearance	Poor-defined irregular	Poor-defined
ulceration	+	+
pain	-	-



註: Travel along nerves through mental foramen to mandibular canal,所以通常遇到這個CA “嘴唇會麻”

# Spindle cell carcinoma



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## Our Case



# Leiomyosarcoma

	Our Case	Leiomyosarcoma
Gender	Male	M=F
age	74	Middle-aged and older adults
site	Mandible anterior gingiva	Almost in the jaw bones
X-ray appearance	Poor-defined irregular appearance	Poor-define
ulceration	+	+





# Leiomyosarcoma



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## Our Case



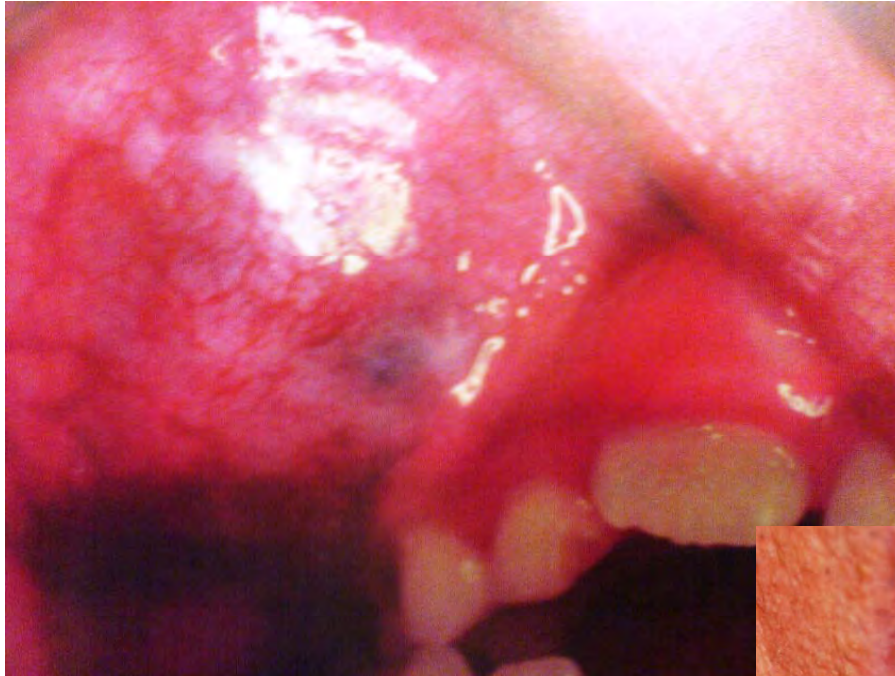
# Rhabdomyosarcoma

	Our Case	Rhabdomyosarcoma
Gender	Male	M>F
age	74	10~25 y/o
site	Mandible anterior gingiva	Head & neck (most: orbit)
X-ray appearance	Poor-defined irregular appearance	Poor-defined
ulceration	+	+
pain	-	-



註：Pleomorphic rhabdomyosarcoma <5% → over 40 y/o 且好發在四肢

# Rhabdomyosarcoma



## Our Case

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# Conclusion

1. Squamous cell carcinoma
2. Spindle cell carcinoma
3. Tuberculosis osteomyelities
4. Leiomyosarcoma
5. Rhabdomyosarcoma



Thanks for your attention!