

Case Report

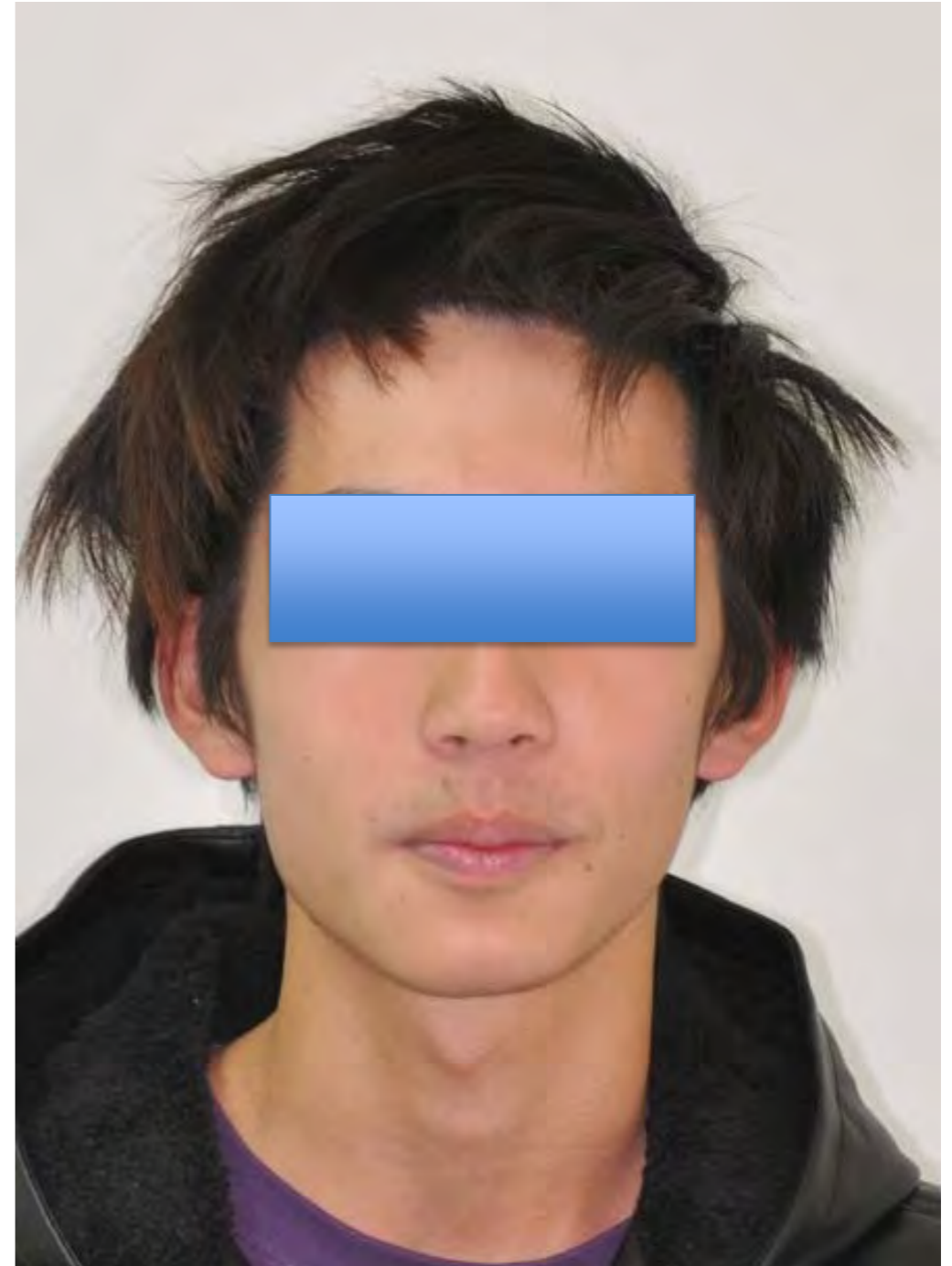
Intern G

2011 February

指導醫師：口腔病理科全體醫師

Personal Data

- Name : 陳XX
- Chart No. : 2xxxxxx1
- Gender : male
- Age : 15 y/o
- Occupation : Student
- Address : 高雄市左營區
- Date of first visit : 99/10/26
- Attending V.S. : 黃逸岳 醫師



Chief Complaint

- Tumor mass over right posterior maxilla for a half year

Present Illness

- This 15 y/o male suffered from a swelling over right posterior maxilla for more than half a year. He went to LDC for help. The doctor suggested him to the hospital for examination. He went to 高榮 for X-ray examination and biopsy. Then, her mother took him to see Dr. 洪堅銘 who suggested him to visit KMU OS OPD for further treatment.

Past Medical History

- Systemic disease : denied
- Drug/food allergy : denied
- Hospitalization : denied

Past Dental History

- Scaling
- Operative Dentistry restoration
- Endodontic tx.
- Fixed prosthesis
- Attitude to dental treatment : cooperative

Personal Habits

- Alcohol drinking (-)
- Betel nut chewing (-)
- Cigarette smoking (-)
- Denied other specific habits

Physical Examination

- A swelling area over upper right molar region



Panorex finding



Bridge: 11-21

Impaction: 17, 28, 38, 48

Lower anterior crowding

Filling(resin): 16,26,36,46

Endodontic treatment: 46

Rotation: 43

Radioaque lesion: 36 distal root

Inflammation

Cyst

Neoplasm

	Our case	Inflammation	Cyst	Neoplasm
Color	Normal	Red	Normal	Variable
Discharge	-	+	-	-
Consistency	Firm	Rubbery	Soft	Firm
Pain	-	+	-	+/-
Ulceration	-	-	-	+/-
Mobility	Fixed	Fixed	Fixed	Fixed
Duration	A half year	Days	Years	Months

Inflammation

Cyst

Neoplasm

	Our case	Benign	Malignancy
Surface	Smooth	Smooth	Rough
Ulceration	-	-	+
X-ray margin	Well-defined	Well-defined	Poor-defined
Mobility	Fixed	Movable	Fixed
Lap	-	-	+
Duration	Half a year	Years	Months

Inflammation

Cyst

Neoplasm

Benign

Malignant

	Our case	Central	Peripheral
Consistency	Firm	Firm	Rubbery
Ulceration	-	+/-	+/-
Induration	-	-	+
X-ray border	Well-defined	Well-defined	Ill-defined
Bony expansion or perforation	+	+/-	+
Mobility	Fixed	Fixed	Fixed

Inflammation

Cyst

Neoplasm

Benign

Malignant

Central

Peripheral

Working Diagnosis

- Mixed radiolucent-radiopaque lesion
 - Odontoma
 - Ameloblastic fibroodontoma
 - Adenomatoid odontogenic tumor
 - Calcifying epithelial odontogenic tumor

Odontoma

- Developmental anomalies
- Consist chiefly enamel and dentin
- Most common types of odontogenic tumor
- May prevents eruption of tooth
- Simple local excision

Comparison

	Our case	Odontoma(compound)
Gender	M	Both(1:1)
Age	15	5~20(14)
Site	Upper right posterior area	Anterior maxilla
Pain	-	-
Ulcer	-	-
LAP	-	-
Consistency	Firm	Firm
Shape	Well-defined	Well-defined
Features	Radiopaque, smooth contours, with unerupted tooth	Composed of multiple, small tooth like structure

Comparison

	Our case	Odontoma(complex)
Gender	M	Both(1:1)
Age	15	5~20(14)
Site	Right posterior maxilla	Molar region
Pain	-	-
Ulcer	-	-
LAP	-	-
Consistency	Firm	Firm
Shape	well-defined	well-defined
Features	Radiopaque, smooth contours, with unerupted tooth	Consists of a conglomerate of enamel and dentin

Adenomatoid odontogenic tumor

- Arised from remnants of dental lamina or enamel organ epithelium
- Largely limited to younger patient
- Seldom exceed 3.0 cm in greatest diameter
- Usually appear as small, sessile masses on the facial gingival of the maxilla
- Tx: Enucleation

Comparison

	Our case	AOT
Gender	M	F:M = 2:1
Age	15	16.5
Site	Right posterior maxilla	Anterior jaw
Pain	-	-
Ulcer	-	-
LAP	-	-
Consistency	Firm	Firm
Shape	Well-defined	Well-defined
bony expansion	+	+
Features	Radiopaque, smooth contours, with unerupted tooth	Unilocular RL involved the crown of an unerupted tooth

Ameloblastic fibrodontoma

- Appear as a developing odontoma
- Progressive growth, causing deformity and bony destruction
- Some may appear as largely calcified masses with only a narrow rim of RL
- Conservative curettage

Comparison

	Our case	AF
Gender	M	no predilection
Age	15	10
Site	Right posterior maxilla	Posterior jaw
Pain	-	-
Ulcer	-	-
LAP	-	-
Consistency	Firm	Firm
Shape	Well-defined	Well-defined
Features	Radiopaque, smooth contours, with unerupted tooth	Unilocular, or rarely, multilocular. RL contain with calcified material and an unerupted tooth

Calcifying epithelial odontogenic tumor

- Pindborg tumor
- Its origin is uncertain
- Conservative local resection
- Recurrent rate : 15%

Comparison

	Our case	CEOT
Gender	M	No predilection
Age	15	30-50
Site	Right posterior maxilla	posterior jaw
Pain	-	-
Ulcer	-	-
LAP	-	-
Consistency	Firm	Firm
Shape	Well-defined	Well-defined
Features	Radiopaque, smooth contours, with unerupted tooth	Unilocular or multilocular radiolucent image , but may contain calcified structure of varying size and density

Working diagnosis

- Ameloblastic fibroodontoma
- Odontoma(complex)
- Adenomatoid odontogenic tumor
- Calcifying epithelial odontogenic tumor

Clinical impression

- Ameloblastic fibrodontoma, right posterior maxilla

Thanks for listening

