

CASE REPORT

Intern I

指導醫師：口腔病理科全體醫師

PERSONAL DATA

- Name : 王XX
- No. of Chart : 2xxxxx8
- Gender : Male
- Age : 43 y/o
- Occupation : 工
- Address : 屏東縣屏東市
- Date of first visit : 100/04/04

CHIEF COMPLAINT

- A swelling mass over lower anterior teeth

PRESENT ILLNESS

- This 43 y/o male was transferred to our emergent department(ED) for help due to rapid progression of neck pain and abdomen extension. At our ED, the initial vital sign listed below: BP:120/87mmHg HR:110 RR:20 BT:37.5. The general survey was done, and the Abdomen CT and Chest CT revealed bilateral hilar and subcarina lymph node and right lower lobe pneumonia or atelectasis with ascites, bilateral liver lobe multiple metastasis and suspect carcinomatosis from the infiltrated peritoneum with pleural effusion ,with 4th rib metastasis.
- He also got the lower gingiva hypertrophy and swelling with local redness, so 肝膽內科 consulted our 口腔外科 for help

PAST MEDICAL HISTORY

- Disease history:
 - alcoholic impaired liver function for many years
 - Asthma(denied)
- Diabetes mellitus: denied
- Hypertension: denied
- HBV/HCV: denied/denied
- Coronary heart disease: (denied)
- Ischemiac/hemoragic stroke: (denied)/(denied)
- Operation history: for right ankle laceration
- Hospitalization: for right ankle laceration

PAST DENTAL HISTORY

- Attitude to dental treatment : cooperative

PERSONAL HABITS

- Alcohol drinking (+)
 - 2 bottle bear and some 高粱 for more than 10 years with quitting for several years
- Betel nut chewing (-)
- Cigarette smoking (+)
 - 2 PDD for more than 20 years
- Denied other specific habit

PHYSICAL EXAMINATION

- A swelling over labial gingiva of tooth 31-41, red, polypoid, firm, pedunculate, smooth surface, measured 1.5X0.7cm



Inflammation

Neoplasm

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

Inflammation

Cyst

Neoplasm

Benign

Malignant

WORKING DIAGNOSIS

- Malignant neoplasm
 - Metastases to the oral soft tissues
 - Adenosquamous carcinoma
 - Kaposi's sarcoma
- Benign neoplasm
 - Peripheral giant cell granuloma
 - Peripheral ossifying fibroma
- Pseudo-tumor
 - Pyogenic granuloma

MALIGNANT NEOPLASM

- ⦿ Metastases to the oral soft tissues
- ⦿ Adenosquamous carcinoma
- ⦿ Kaposi's sarcoma

METASTASES TO ORAL SOFT TISSUE

- ◉ 0.25% of all oral malignancies
- ◉ Most common site is gingiva(50%), tongue(25%)
- ◉ Usually appears as a nodular mass
- ◉ Male: lung cancer 1/3, followed by renal carcinoma and melanoma
- ◉ Female: breast cancer 1/4, followed by malignancies of genital organs, lung, bone and kidney
- ◉ In most cases, primary tumor already is known when the metastatic lesion is discovered.

COMPARISON

	Our case	Metastases to the oral soft tissues
Gender	M	M
Age	43	Middle-age and older adult
Site	Gingiva	Gingiva (50%)
Pain	-	+/-
Ulcer	-	+/-
LAP	+	+
Consistency	firm	firm
Shape	Polypoid mass	Nodular/polypoid mass
Features	Smooth surface	1% of all oral malignancies

ADENOSQUAMOUS CARCINOMA

- ◉ rare variant of SCC
- ◉ combination of SCC and adenocarcinoma
- ◉ adenoid pattern (glandular)
- ◉ 80% metastatic deposit, neck nodes
- ◉ high grade mucoepidermoid carcinoma
- ◉ older people
- ◉ tongue oral floor mucosa

COMPARISON

	Our case	Adenosquamous carcinoma
Gender	M	-
Age	43	Middle-age and older adult
Site	Gingiva	tongue oral floor mucosa
Pain	-	-
Ulcer	-	-
LAP	+	+
Consistency	firm	firm
Shape	Polypoid mass	-
Features	Smooth surface	combination of SCC and adenocarcinoma



COMPARISON

	Our case	Immunodeficiency type
Gender	M	-
Age	43	teenager
Site	Gingiva	Skin , mucosa , visceral organ'
Pain	-	+
Ulcer	-	+/-
LAP	+	-
Consistency	firm	rubbery
Shape	Polypoid mass	nodule
Features	Smooth surface	aggressive

BENIGN NEOPLASM

- Peripheral giant cell granuloma
- Periphery ossifying fibroma

PERIPHERAL GIANT CELL GRANULOMA

- ⦿ Case by local irritation or trauma
- ⦿ 60% in female
- ⦿ Usually smaller than 2 cm in diameter
- ⦿ Mandible is affected slightly more often than maxilla
- ⦿ Tx: local surgical excision down to the underlying bone

COMPARISON

	Our case	Peripheral giant cell granuloma
Gender	M	F(60%)
Age	43	50-60 y/o
Site	Gingiva	1 st molar 之間 前, incisor 之間 gingiva
Pain	-	-
Ulcer	-	+/-
LAP	+	-
Consistency	firm	soft
Shape	Polypoid mass	Sessile or pedunculated
Features	Smooth surface	

PERIPHERY OSSIFYING FIBROMA

- ◉ Exclusively on gingival, slightly maxilla, emanate from interdental papilla
- ◉ nodular mass, pedunculate/sessile
- ◉ red to pink, about 2 cm
- ◉ Teenager , 2/3 female

COMPARISON

	Our case	Periphery ossifying fibroma
Gender	M	F(2/3)
Age	43	teenager
Site	Gingiva	gingiva
Pain	-	-
Ulcer	-	-
LAP	+	-
Consistency	firm	rubbery
Shape	Polypoid mass	nodular mass Pedunculate/ sessile
Features	Smooth surface	from interdental papilla

CLINICAL IMPRESSION

- Metastasis to the oral soft tissues over labial gingiva of tooth 41,42

HISTOPATHOLOGIC DIAGNOSIS

- Adenocarcinoma, metastatic over labial gingiva of lower anterior teeth (41,42)