

OM CASE REPORT

指導老師：口腔病理科全體醫師
報告者：**Intern-B**

魏大鈞

胡郁佳

彭玠中

黃鈺芬

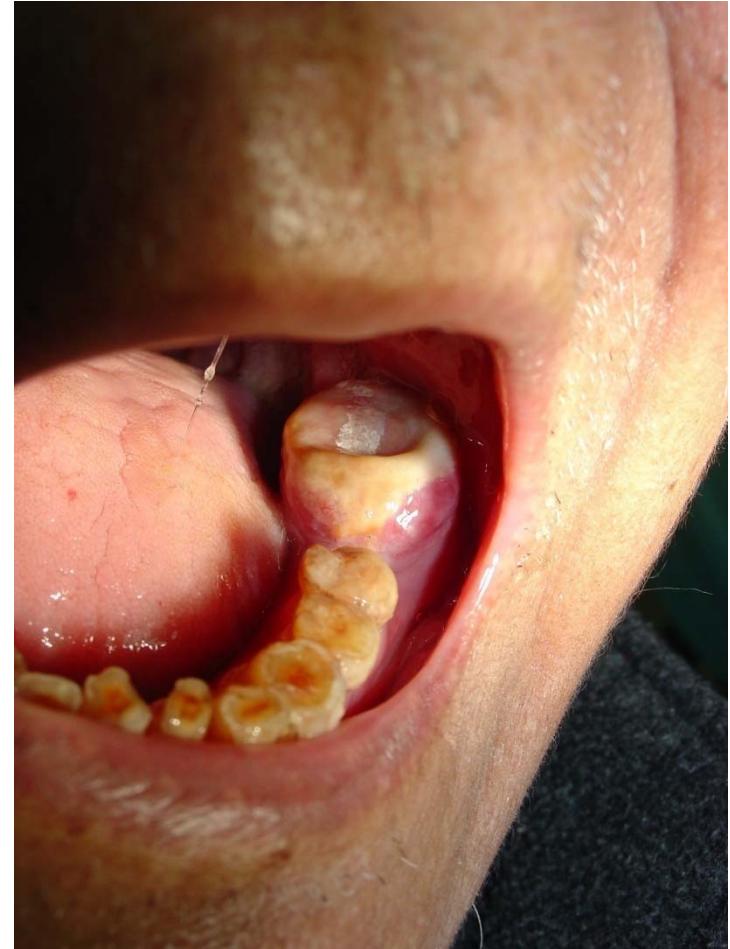
李嘉翔

General data

- Name : 張x華
- Gender : male
- Age : 89
- Native : 屏東
- Marital status : 已婚
- Occupation : unknown
- Attending V.S. : Dr.黃逸岳
- First visit : 97.01.03

Chief complaint

- A painless exophytic mass over edentulous tooth 37 area about two weeks



Present illness

- The 89 y/o male complained that a mass existed over edentulous tooth 37 area for about 2 weeks. He went to LDC for help and the doctor suggested him go to 高醫H. for further examination.
- Therefore, he went to ER. Dept. on **96.12.29** for further treatment and received periodontal-emergency treatment over tooth 27 and topical GI application over edentulous tooth 37 area.
- After dental treatment, the doctor referred the patient to OS. Dept. for further examination on **97.01.03**.

Past history

Past medical history

- Hypertension
- Renal disease : renal dialysis
- Have been hospitalized for pleural effusion
- Denied any drug or food allergy

Past dental history

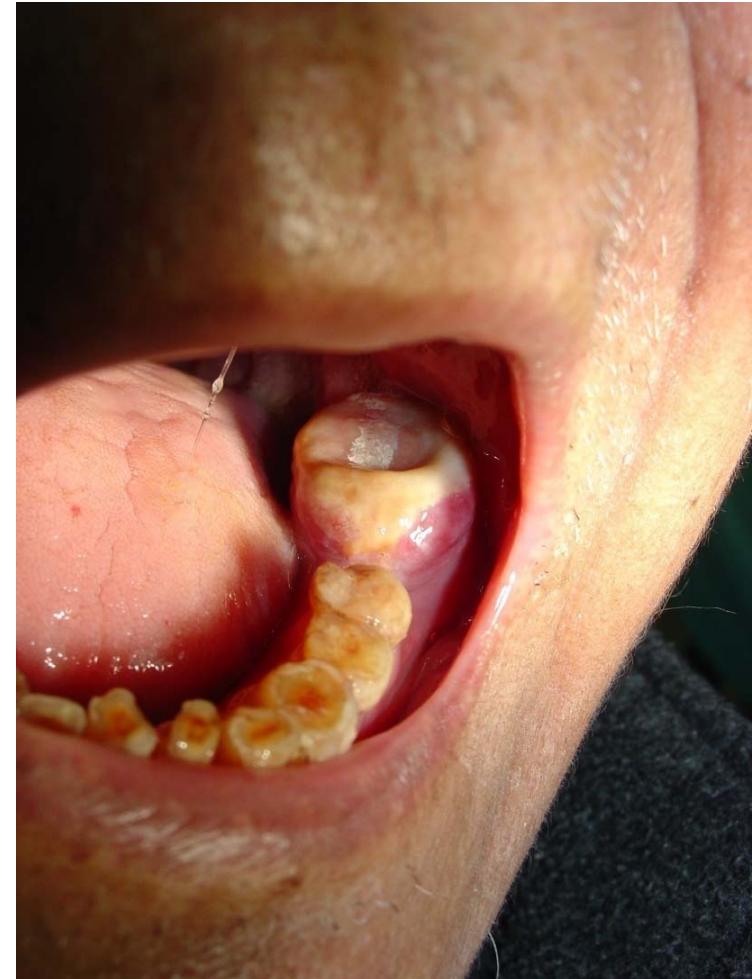
- NP

Personal habits

- Alcohol : (-)
- Betel quit : (-)
- Cigarette : (-)
- Other special habits : denied

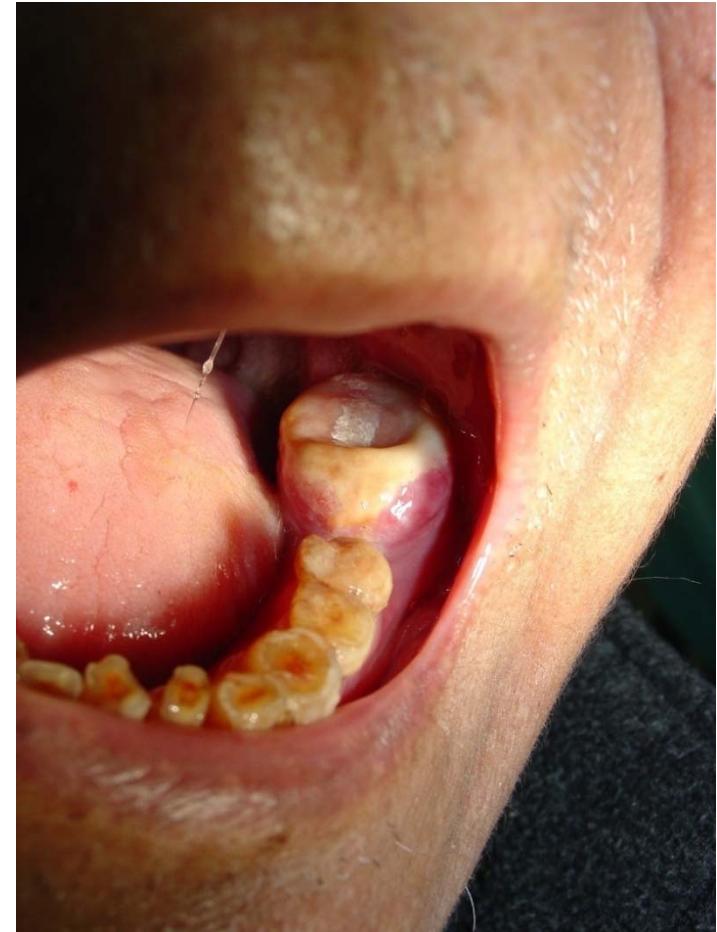
Intraoral examination(97.01.03)

- A dome-shape mass with smooth surface and sessile base over edentulous tooth 37 area, measuring about 2.5x3x1.5 cm in dimension
- There is a milk-like color appearance on the mass with white patch in the center, and red color in the peripheral area
- Biting imprint on the mass
- Generalized attrition is noted

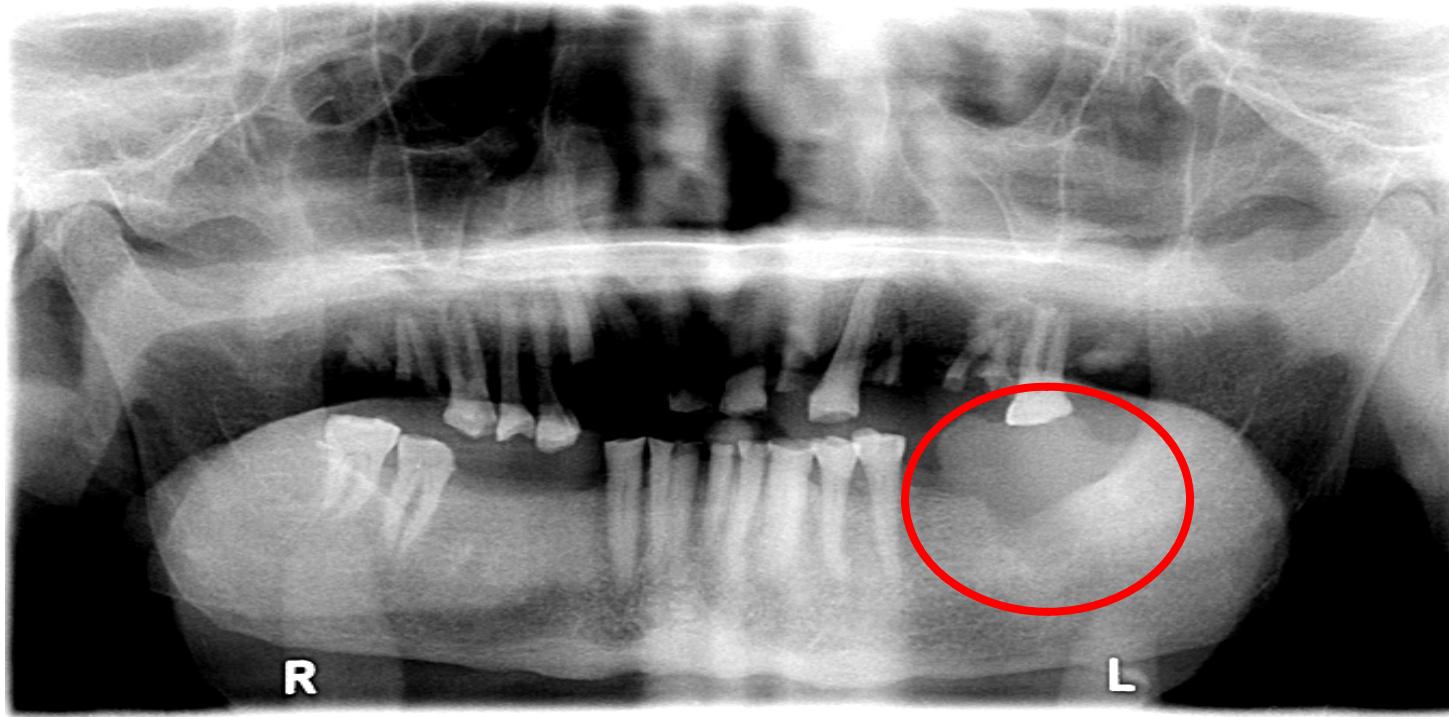


Oral & maxillofacial examination

- Pain : (-)
- Tenderness : (-)
- Consistency : rubbery
- Fluctuation : (-)
- Mobility : fixed
- Induration : unknown
- Fever : (-)
- Lymphadenopathy : unknown
- Duration : 2 weeks



Radiographic examination



There is an ill-defined cup-shaped R-L image without corticated border over the edentulous tooth 37 area, measuring about 2×2.5 cm in diameter. And there is a well-defined rectangular shape R-O image above the edentulous ridge, measuring about 3×2.5 cm in diameter.

Differential diagnosis

Inflammation or
neoplasm or cyst
?

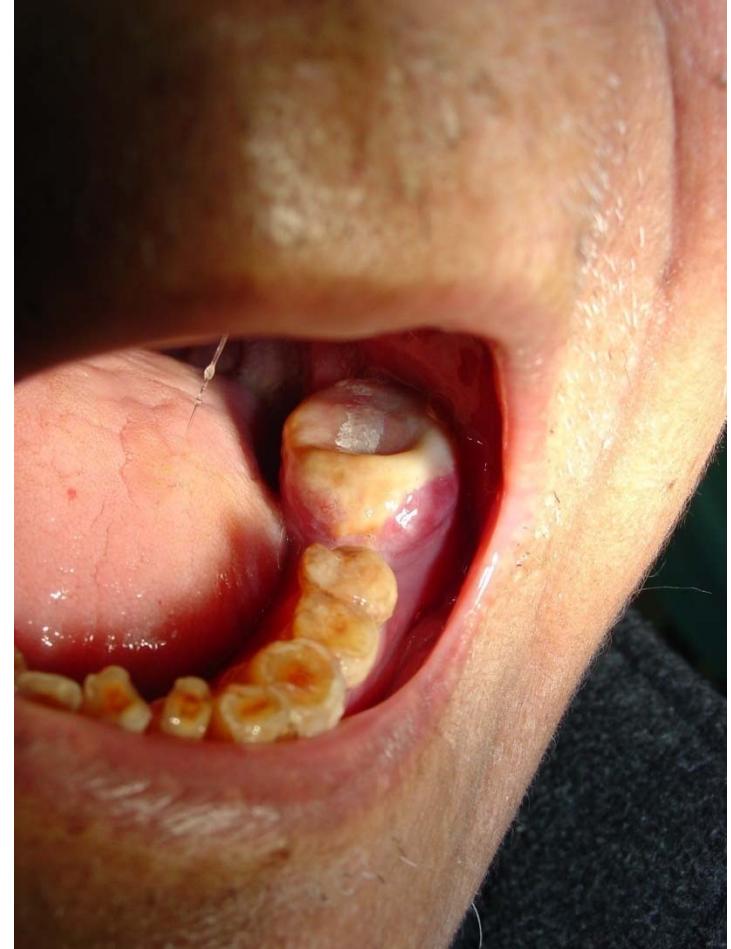
Benign or
malignant ?

Peripheral or
intrabony origin ?

Inflammation or neoplasm or cyst

- Local heat or fever : (-)
- Involve the underlying bony structure : (+)

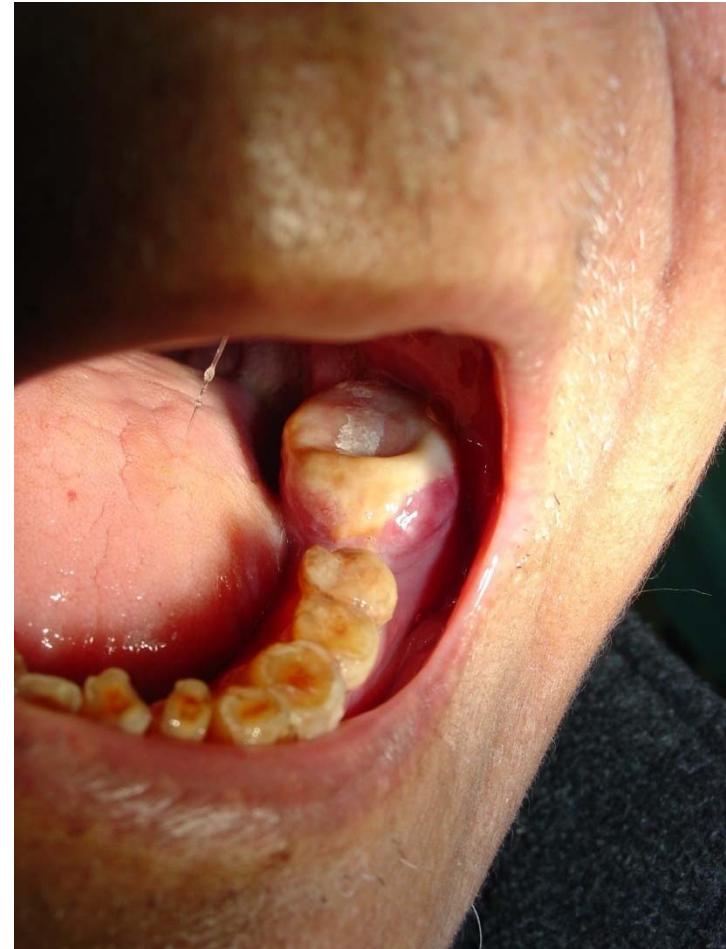
→ neoplasm



Benign or malignant

- Duration : 2 weeks
- Involve bony tissue
- Ill-defined irregular margin
- Ulceration : (+)
- Tenderness : (-)
- Pain : (-)
- LAP: unknown
- Induration : unknown

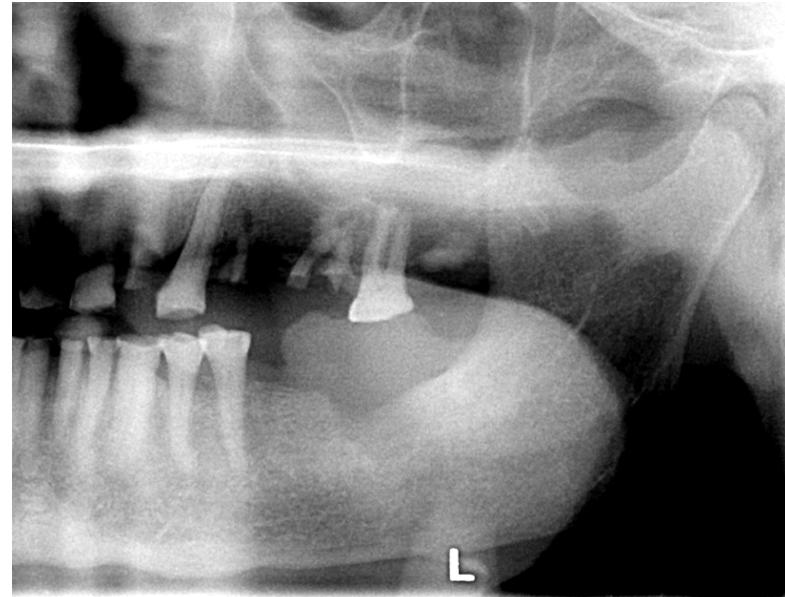
→ malignant



Intrabony or peripheral origin

- Mucosa lesion : a ulcerative exophytic dome-shape mass
- Bony destruction : (+) (cupping)

→ peripheral



Working diagnoses

Peripheral malignant neoplasm

- **Exophytic squamous cell carcinoma**
- **Non-Hodgkin lymphoma**
- **Malignant fibrous histiocytoma**
- **Metastatic tumor**



Exophytic SCC

	our case	SCC
gender	male	male (but in gingiva → female)
age	89 y/o	elder people
site	posterior Jaw bone and gingival area	lateral border of tongue
color	red with white	totally white/pink to red possibly with some white
base	sessile	sessile/pedunculated
shape	dome-shape	Mass forming/fungating Papillary/verruciform

Exophytic SCC

	our case	SCC
consistency	rubbery	firm
pain	-	+/-
ulcer	+	+/-
tenderness	-	+/-
induration	Unknown	+
LAP	Unknown	+/-
mobility	Fixed	Fixed



Exophytic SCC

X-ray finding	our case	SCC
border	ill-defined without corticated border	ill-defined, noncorticated
Radio-density	R-L	totally R-L
Shape	Cup/tub shape	<ol style="list-style-type: none">1.irregular2.destruction of underlying bone may present as “moth-eaten appearance”
effect on surrounding structures/adjacent teeth	Bone destruction	<ol style="list-style-type: none">1.bone destruction2.teeth may appear to float in a mass of adjacent R-L soft tissue bereft of any bony support

Non-Hodgkin's lymphoma

	our case	NHL
gender	male	no predilection
age	89 y/o	adult
site	posterior Jaw bone and gingival area.	most common in buccal vestibule , posterior hard palate , gingiva
color	red with white	erythematous or purplish
base	sessile	sessile
Shape	dome-shape	dome-shape

Non-Hodgkin's lymphoma

	our case	NHL
consistency	rubbery	boggy
pain	-	+/-
ulcer	+	+ /-
tenderness	-	-
induration	unknown	---
LAP	unknown	+
mobility	fixed	fixed

Non-Hodgkin's lymphoma

X-ray finding	our case	NHL
border	ill-defined without corticated border	ill-defined or ragged margin
radiodensity	R-L	R-L
Shape	cup/tub shape	irregular
effect on surrounding structures/adjacent teeth	Bone destruction	May destroy the cortex of bone , involved tooth may be displaced .

Non-Hodgkin's lymphoma



Malignant fibrous histiocytoma

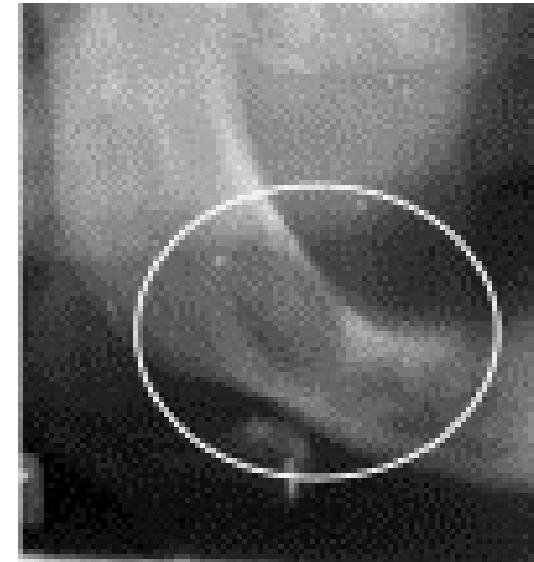
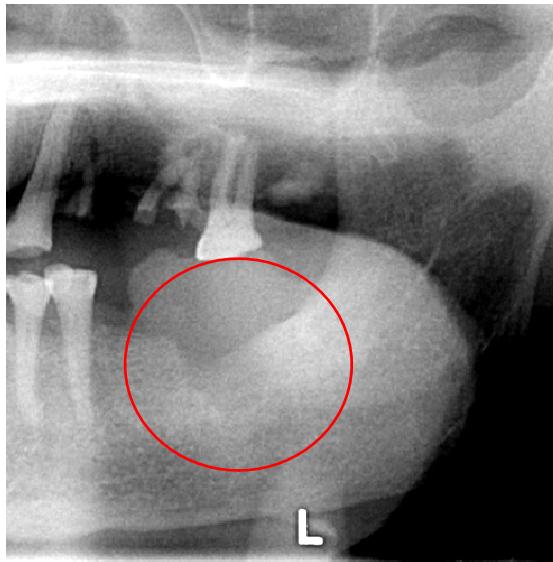
	our case	MFH
Gender	Male	M:F=2:1
age	89	Older adults(50~70 y/o)
site	posterior Jaw bone and gingival area.	<ol style="list-style-type: none">1. Any organ extremities and the retroperitoneum2. Posterior part of mandible
shape	dome-shape	Dome-shape
Base	sessile	sessile or pedunculated

Malignant fibrous histiocytoma

	our case	MFH
consistency	rubbery	Rubbery to soft
pain	-	-
Ulcer	+	+/-
Tenderness	-	+/-
Induration	Unknown	Unknown
LAP	Unknown	+(Oral)

Malignant fibrous histiocytoma

X-ray finding	our case	MFH
border	ill-defined without corticated border	Ill-defined
radiodensity	R-L	R-L
effect on surrounding structures/adjacent teeth	Cupping resorption of underlying bone	periosteal reaction, cortical erosion, and pathologic fracture



Metastatic tumor

	our case	Metastatic tumor
gender	male	Jaw bone [M:F=1:1] Soft tissue [M:F = 1.6:1]
age	89	40~70 y/o
site	posterior Jaw bone and gingival area.	Soft tissue : gingival [>50%] Hard tissue : mandible [molar and premolar area]
color	red with white	red , or red and white [in large tumor due to chronic trauma]
base	sessile	sessile
shape	Dome-shape	Dome-shape

Metastatic tumor



Metastatic tumor

	our case	metastatic tumor
consistency	rubbery	firm
pain	-	+/-
ulcer	+	+ [in large tumor due to chronic trauma] / -
tenderness	-	+/-
Induration	unknown	+/-
LAP	unknown	+/-
mobility	fixed	fixed

Metastatic tumor

X-ray finding	our case	metastatic tumor
border	ill-defined without corticated border	most often ill-defined
radiodensity	R-L	R-L
shape	Cup/tub shape	most often a “moth-eaten” appearance and may be well circumscribed
effect on surrounding structures/adjacent teeth	Bone destruction	<ol style="list-style-type: none">1. cause irregular widening of the PDL2. teeth float in the soft tissue mass3. cortical bone of adjacent structure destroy

Clinical Impression

**Exophytic squamous cell carcinoma
over edentulous tooth 37 area**

**Thanks
For
Your
Attention**

