Interesting case

Intern A組
報告日期：97.2.26
指導老師：口腔病理科全體醫師
General data

- Name: 侯XX
- Age: 46 y/o
- Gender: Male
- Occupation: Driver
- Marital status: Married
- Native: 嘉義縣
- 初診日期: 92.3.26
- 主治醫師: 王文岑醫師
Chief complaint

Receiving NPC post RT follow-up
Present illness

- This 46 y/o male patient was receiving NPC post RT follow-up on 92/03/26. On 93/09/01, a PAP was noticed over apex of tooth 45 with percussion pain. Endodontic treatment was performed with Vitapex dressing and keep f/u.

- 93/11/12, cystic-like lesion was found over 45 apex, and was suspected to be a radicular cyst. Enucleation was performed by Dr. 沈也雄 and specimen was sent for HP examination.

- 93/11/19, HP report diagnosed to be ameloblastoma over right mandible premolar area.
Present illness (Cont.)

- On 93/12/3, RCF of tooth 45 with GP was performed by Dr. 王文岑.
- 93/12/3~95/03/8, follow-up with Panorex showed no S/S.
- 95/05/24, RL over 46 mesial root was noticed to be enlarged.
- 95/05/24~97/01/16, patient lost f/u for 20 months.
- 97/01/16, multilocular RL was found over 45, 46 area on Panorex with 46 root resorption.
Past medical history

- Hepatitis
- Nasopharyngeal cancer
- Hypertension
- Hospitalization (+): 陰囊水腫
- Drug allergy (+): unknown
Past dental history

- OD
- Endo
- OHI
- Topical Fluoridation
- Scaling
- Smear cytology
Personal habits

Cigarette smoking (+): 1 pack/day, quit
Alcohol drinking (+): quit
Betel quid chewing (+): quit
Denied any other special oral habits
Intra-oral examination

- Normal appearing with no obvious swelling over vestibular mucosa of tooth 44, 45, 46.
- Gingiva recession of tooth 43, 44, 45, 46.
- Severe occlusal attrition of tooth 44, 45, 46.
X-ray examination
There is a well-defined multilocular irregular-shaped radiolucence without a corticated margin, causing mild mesial displacement of tooth 45 and distal displacement of tooth 46, extending from distal aspect of tooth 44 to distal aspect of tooth 46.

There is a well-defined multilocular irregular-shaped radiolucence without a corticated margin over right mandible body, causing bony expansion and thinning of cortical bone, extending from distal aspect of tooth 44 to distal aspect of tooth 46.
There is a well-defined multilocular irregular-shaped radiolucence without a corticated margin over right mandible body, causing mild mesial displacement of tooth 45 and distal displacement of tooth 46. It extends from distal aspect of tooth 44 to distal aspect of tooth 46 in one direction and from the alveolar crest down to 2/3 of mandible in other direction, measuring approximately 3 x 3 cm in diameter.
Inflammation or neoplasm or cyst

Neoplasm or cyst
Benign or malignant

Benign
Peripheral or intrabony
Intrabony
Working diagnosis

- Ameloblastoma
- Odontogenic myxoma
- Odontogenic keratocyst
- Glandular odontogenic cyst
## Ameloblastoma

<table>
<thead>
<tr>
<th>好發年齡</th>
<th>10 y/o 以下少見  30~70發生率大約相等</th>
</tr>
</thead>
<tbody>
<tr>
<td>好發位置</td>
<td>Molar-ascending ramus area</td>
</tr>
<tr>
<td>臨床症狀</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Asymptom</td>
</tr>
<tr>
<td></td>
<td>2. Painless swelling</td>
</tr>
<tr>
<td></td>
<td>3. <strong>Expansion of jaw bone</strong></td>
</tr>
<tr>
<td>X-ray 特徵</td>
<td></td>
</tr>
<tr>
<td></td>
<td>1. Well-defined multilocular R-L with non-corticated margin</td>
</tr>
<tr>
<td></td>
<td>2. “Soap bubble” appearance</td>
</tr>
<tr>
<td></td>
<td>3. Irregular scalloping margin</td>
</tr>
</tbody>
</table>
### Odontogenic myxoma

<table>
<thead>
<tr>
<th>好發年齡</th>
<th>25-30歲，男女機率相等</th>
</tr>
</thead>
<tbody>
<tr>
<td>好發位置</td>
<td>Mandible &gt; Maxilla</td>
</tr>
<tr>
<td>臨床症狀</td>
<td>Small : no symptom</td>
</tr>
<tr>
<td></td>
<td><strong>Larger : painless swelling of bone</strong></td>
</tr>
<tr>
<td>X-ray 特徵</td>
<td>1. Well-defined unilocular or multilocular R-L with no corticated margin</td>
</tr>
<tr>
<td></td>
<td>2. Irregular or scalloped margin</td>
</tr>
<tr>
<td></td>
<td>3. “Soap bubble” appearance</td>
</tr>
<tr>
<td></td>
<td>4. Contain thin, wispy, trabeculae of residual bone</td>
</tr>
<tr>
<td></td>
<td>5. Cause root resorption, and the displacement of adjacent teeth</td>
</tr>
</tbody>
</table>
## Odontogenic keratocyst

<table>
<thead>
<tr>
<th>好發年齡</th>
<th>10-40 y/o</th>
</tr>
</thead>
<tbody>
<tr>
<td>好發位置</td>
<td>Mandibular posterior area. ramus</td>
</tr>
</tbody>
</table>
| 臨床症狀   | 1. Asymptom  
2. Pain, swelling, drainage  
3. Antero-posterior direction without obvious bone expansion |
| X-ray 特徵 | Well-defined multilocular R-L with smooth and corticated margin |
| 其他       | Unerupted teeth involved |
**Glandular odontogenic cyst**

<table>
<thead>
<tr>
<th>好發年齡</th>
<th>Middle-aged</th>
</tr>
</thead>
<tbody>
<tr>
<td>好發位置</td>
<td><strong>Mandibular anterior (cross midline)</strong></td>
</tr>
</tbody>
</table>
| 臨床症狀 | 1. Asymptom  
2. Pain, paresthesia |
| X-ray 特徵 | Unilocular or multilocular R-L with sclerotic rim |
Clinical impression

Ameloblastoma, right mandibular body
Post-op

97.2.14
Thanks for your attention