原文題目(出處):	Dental abnormalities in pituitary dwarfism: A Case report		
	and review of the literature. Case Rep Dent Volume 2017,		
	Article ID 5849173		
原文作者姓名:	Franco Ferrante, Sergio Blasi, Rolando Crippa, and		
	Francesca Angiero		
通訊作者學校:	Department of Surgical Medical Sciences and Integrated		
	Diagnostic, University of Genoa, Genoa, Italy		
報告者姓名(組別):	邱艾欣 (Intern K 組)		
報告日期:	106.06.06		

I. Introduction

Pituitary dwarfism 垂體性侏儒症

- the body fails to use the pituitary growth hormone (GH)
- congenital(rare) or acquired 先天(罕見)或後天
- nonsecreting adenomas 腺瘤
- ischemic necrosis of the pituitary gland 缺血性壞死
- surgical removal or irradiation of the pituitary adenohypophysis 手術切除或放療

Hormone deficiency

- no or decreased production
- inadequate absorption by the tissues responsible
- period of onset: expressed either in childhood or in adulthood

If expressed in childhood:

- Characteristic : underdeveloped forehead or retrognathism, small nose, childish face, and thin skin
- the maxilla and mandible being abnormally small
- lead to tooth malformation
- hypodontia, delayed tooth eruption, abnormalities of tooth shape and size, and double or impacted teeth.
- The skeletal age is below the stature age
- height below120cm

II. Case Presentation

- A woman of 50 with very short stature (affected by pituitary dwarfism)
- Hypodontia together with multiple abnormalities, including tooth shape, small size, and double teeth (圖 1, 2)
- Panorex: five impacted teeth; fused roots of tooth 32-33 (圖 3) rejected any form of removable partial denture.
- Fixed ceramic prosthesis: 43-42-41-x-32-33 (with zirconium substructure)
- tooth prepare→ impression→ temporary prosthesis→ delivery(4)



圖 1: Initial clinical situation





圖 2: The initial situation



圖 4: The final phase of prosthetic rehabilitation.

III. Discussion

The anterior lobe of the pituitary gland:

- secretes :
 - i. Growth hormones 生長激素(GH)
 - ii. Prolactin 泌乳激素(PRL)
 - iii. Thyroid stimulating hormone 促甲狀腺素(TSH)
 - iv. Follicle stimulating hormone 促濾泡生成素(FSH)
 - v. Luteinizing hormone 黃體生成素(LH)
 - vi. Adrenocorticotropic hormone 腎上腺皮質素(ACTH)
- Metabolic control, puberty and reproduction, stress response, and lactation

Etiology of pituitary hormone deficiency:

- genetic background
- environmental factors

Literature search:

✓ 57 cases with the presence of numerous anomalies (in particular 13 abnormalities in pituitary dwarfism)-- searching in PubMed for "oral cavity hypopituitarism")

TABLE 1: Incidence of dental anomalies in pituitary dwarfism resulting from a search of PubMed for "oral cavity hypopituitarism" (ordered from most to least frequent abnormalities).

Oral abnormalities in pituitary dwarfism	Reported percentage incidence	Presence/absence in the case reported
Periodontal disease	98%	Present
Orthodontic malocclusion	95%	Present
Small size of the maxilla and mandible with overcrowding of teeth	95%	Present
Retention of permanent teeth in maxillary and mandibular shafts	75%	Present
Marked delay in eruption of permanent teeth	72%	Present
Delayed shedding of deciduous teeth	69%	Undefined
Solitary median maxillary central incisor	<u>59%</u>	Absent
No resorption of roots of deciduous teeth at the usual time	55%	Undefined
Development of apical parts of roots of retained permanent teeth and their growth toward the lower mandibular edge	55%	Present
Tilting of some of the retained teeth	35%	Present
Displacement of first molars from the shaft to the ascending branch of the mandible	<u>10%</u>	<u>Absent</u>
Complete absence of buds of wisdom teeth, even in patients in the fourth decade of life	10%	Present
Radicular fusion with crowns completely separate and independent	0%	Present

- Solitary median maxillary central incisor : occurred in almost 60% of cases of dwarfism
- deficient number of teeth, including diffused or generalized hypodontia : hypothesized the most frequent anomaly.

The case reported here:

- She had not received GH replacement therapy nor thyroid, gonadal, or corticoid replacements.
- very short stature (about 120 cm).
- had 69.2% of all reported anomalies of dwarfism.(表格列出13種只有2種沒有)
- not associated with any other particular disorder

Challenging:

- Prosthetic rehabilitation in the <u>aesthetic zone</u> 美觀區
- Patients with serious <u>syndromes</u> or <u>hormonal dysfunction</u>

Solution:

- a conservative therapeutic 保守治療
- frequent followups are essential

IV. Conclusion

A good prosthetic rehabilitation can be achieved without resorting to surgery

V. Question

題號	題目	
1	下列哪項不是垂體性侏儒症常見的異常?	
	(A) Hypodontia	
	(B) Short stature	
	(C) Macrodontia	
	(D) Delayed shedding of deciduous teeth	
答案	出處: Oral and Maxillofacial PATHOLOGY, Chapter17, Pituitary Dwarfism,	
(C)	p.831	
題號	題目	
2	下列何者關於 Hypodontia 的敘述不正確 ?	
	(A) Genetic control appears to exert a strong influence on the development	
	of teeth. Thus disordered expression of some genes might be	
	implicated in the etiology of hypodontia.	
	(B) The number of missing teeth in a patient with anodontia is less than	
	the number of missing teeth in a patient with oligodontia.	
	(C) Most commonly involves the third molars, second premolars, and	
	maxillary lateral incisors.	
	(D) Hypodontia is uncommon in the deciduous dentition.	
答案	出處:Oral and Maxillofacial PATHOLOGY, Chapter 2, p.77-82,	
(B)	[Developmental alterations in the number of teeth]	