

# 口腔病理科 Case report

Int. D 組

黃南傑、許雅婷

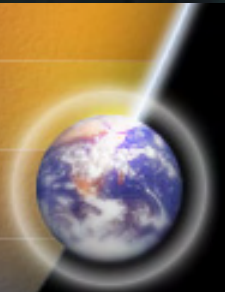
劉嘉芳、莊幼先

指導醫師：口腔病理科全體醫師



# General Information

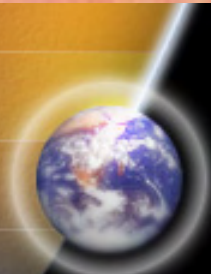
- Name: 薛 X X
- Gender: male
- Age: 39
- Marital status: married
- Native: 高雄縣
- Attending VS.:  
陳中和 醫師
- First visit : 95/09/27





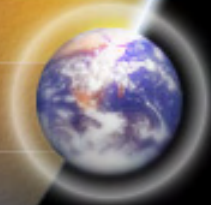
# Chief Complaint

- A huge mass over right palatal side for more than 10 years.
- Right upper posterior toothache recently.



# Present Illness

- This 39 y/o male patient found a huge, painless mass for more than 10 years. At the beginning, he did not notice its size, but he felt it was growing larger gradually.
- Recently he had toothache last week and went to LDC for help. The dentist suggested him to visit our OPD for further examination.
- 95/09/27 First visit at our OPD.





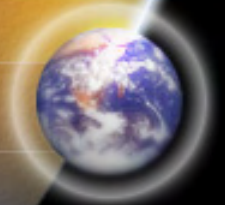
# Intraoral Finding

- Dimension: 3.5×3cm
- Dorm shape
- Smooth surface
- Focal ulceration on surface
- Firm in consistency
- Movable
- Painless
- Tenderness (-)
- Induration (+)
- Crossing midline and soft palate involvement
- Tooth 17 mobility grade II
- Tooth 16 、 27 、 36 、 47 restoration



# Past History

- ❑ Past medical history
  - ❑ Denied any major systemic diseases.
  - ❑ Denied any food or drug allergies.
- ❑ Hospitalization history ( + ) due to appendectomy long time ago ( > 20 years )
- ❑ Past dental history
  - ❑ OD
  - ❑ Attitude to dental treatment: acceptable.





# Personal Oral Habits

☐ Alcohol (+):

☐ 1 bottle/day for 10 years, beer

☐ Persisted until now

☐ Betel quid (+):

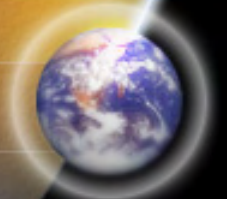
☐ 10 grains/day for 4~5 years

☐ Quitted 2 years ago.

☐ Smoking (+):

☐ 1PPD/day for 15 years.

☐ Persisted until now



# Panoramic Film



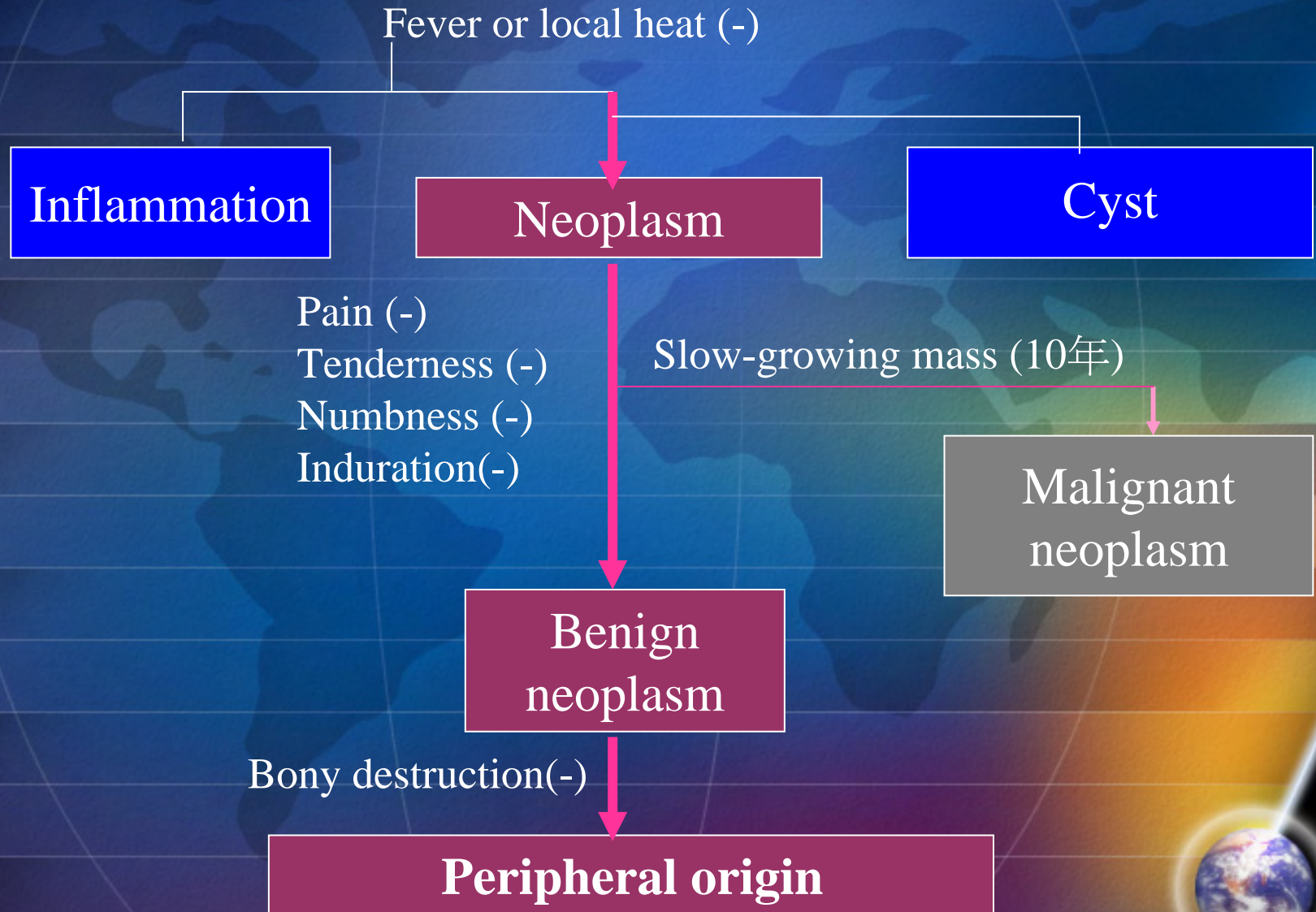




- ❑ Missing tooth: 37 、 46 、 48
- ❑ Filling: 16(MO) 、 27(O) 、 36(O) 、 47(O)
- ❑ Sinus: right sinus floor elevated
- ❑ Condyle: NP
- ❑ Tooth 38 mesial tilting
- ❑ Tooth 18 elongation
- ❑ Angular bony defect: tooth 17
- ❑ Horizontal bony defect



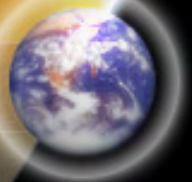
# Differential Diagnosis





# Working Diagnosis

1. Pleomorphic adenoma
2. Basal cell adenoma
3. Canalicular adenoma
4. Schwannoma
5. Neurofibroma
6. Mucoepidermoid carcinoma
7. Polymorphous low grade adenocarcinoma
8. Acinic cell carcinoma



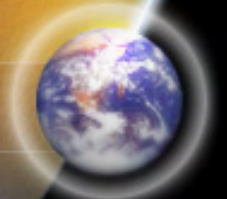
# Pleomorphic Adenoma (Benign mixed tumor)

## ■ High compatible

- 53%~77% of salivary gland tumors
- Slow-growing, painless, firm mass
- Usually age 30-50 (young adults)
- Facial palsy & pain are rare
- Palate is the most common site for minor gland mixed tumor

## ■ Low compatible

- Female





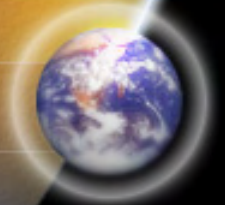
# Basal cell adenoma

## ■ High compatible

- Slow-growing, painless, free movable mass
- Parotid (75%) 1st, minor gland 2nd

## ■ Low compatible

- Female (female: male = 2:1 in some study)
- Can be at any aged, middle-aged (older adults), 61~70 (most)
- Most less than 3 cm in diameter



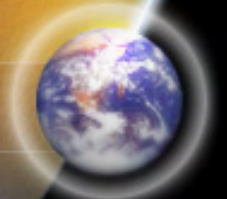
# Canalicular adenoma

## ■ High compatible

- Slow-growing, painless, freely movable mass

## ■ Low compatible

- Female(約男性1.2~1.8倍)
- Usually older adults, 61~70 (most)
- 大小從幾公釐到2公分不等
- Upper lips (73.5%)





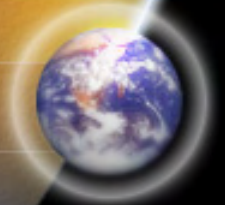
# Schwannoma

## ■ High compatible:

- Benign neural neoplasm
- Slow-growing, asymptomatic (although tenderness or pain may occur in some instances )
- Most common in young and middle-age adults
- Few millimeters to several centimeters in size

## ■ Low compatible

- The most common location is tongue (cancer can occur almost anywhere in the mouth)
- On occasion, the tumor arises centrally within bone and may produce bony expansion.



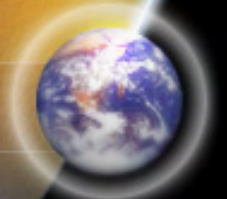
# Neurofibroma

## ■ High compatible:

- Benign neural neoplasm
- Slow-growing, painless
- Size from small nodules to larger masses

## ■ Low compatible:

- Skin is the most frequent location (but lesions of oral cavity are not uncommon )
- Tongue and buccal mucosa are the most common intraoral sites.





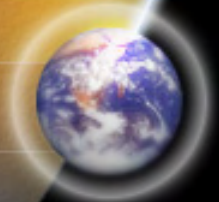
# Mucoepidermoid carcinoma

## ■ High compatible:

- Many years duration
- Asymptomatic
- Made of 15% to 20% minor gland tumors
- Broad age range (2nd to seventh decades)

## ■ Low compatible:

- The most common malignant salivary gland tumor.
- Slight female predilection
- Pain or facial nerve palsy may develop (Although many year duration)



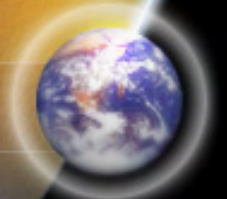
# Polymorphous low grade adenocarcinoma

## ■ High compatible:

- Painless mass
- Present for a long time with slow growth
- Almost in minor salivary gland
- 65% on soft and hard palate

## ■ Low compatible:

- Older people
- Female predilection
- Sometimes bleeding and uncomfortable
- Infiltrate underlying bone





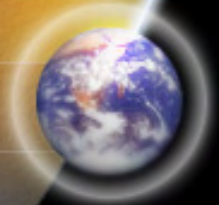
# Acinic cell adenocarcinoma

## ■ High compatible

- Slowing growing mass
- Asymptomatic (pain and tenderness sometimes report)
- Act in a non-aggressive fashion
- 9% develop in the oral minor salivary glands (buccal mucosa, lips, palate being the most common sites)
- Broad age range (2nd to 7th decades), mean age is 40

## ■ Low compatible:

- Malignant salivary gland tumor
- Women to men: 3:2



# Clinical impression

■ Pleomorphic adenoma, right palate



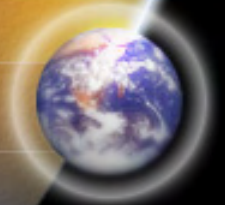
# CT

There is a well-defined homogeneous soft tissue mass over the right palate. The lesion is measured about 4\*4 cm in maximum diameter. The lesion border extends from right alveolar bone to left palate, and from right premolar area to retromolar area. The adjacent bony structure show prominent impression with mild scalloping and preserved cortices



# CT

- There is a huge well-demarcated nearly homogeneous soft tissue mass (3.96cm x 3.81cm x 2.96cm) located over the right aspect of the hard palate.
- The adjacent bony structure show prominent impression with mild scalloping and preserved cortices.
- Multiple enlarged lymph nodes (>1cm) in the bilateral submandibular spaces.
- Multiple small lymph nodes (<1cm) in the submental, the bilateral submandibular, and the posterior cervical spaces.





# Lateral view

- The calvarium is intact.
- The sella turcica is not enlarged.
- Class I malocclusion



# PA view

- Facial symmetry
- No nasal septal deviation is noted.





# Water's view

- The bony structures of the orbits and sinuses are intact.
- Mucosal thickening of right maxillary sinus is present.
- Mild chronic right maxillary sinusitis.



**Thanks for your  
attention**

