

口診SEMINAR 第二組

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GENERAL DATA

- Name: XXX
- Charting no: xxxxx
- Gender: male
- Age: 82 y/o
- Native: Taiwan
- Occupation: 退休
- Marital status: yes
- First visit: xxxxxx



CHIEF COMPLAINT

Unhealed extraction wound and ulceration ,
sore throat for 2-3 months.



PRESENT ILLNESS

- This 82 y/o male had tooth 22 extraction 2-3 months ago. The extraction wound did not heal and ulcerative lesion started to appear.
- His son give him 蜂膠(propolis) to use but no improvement was noted. Recently he felt severe pain when swallowing and could not eat.
- He comes to visit 心血管内科 due to deep vein thrombosis and was referred to our OPD for the oral lesions.



PAST HISTORY

Past medical history

- Hypertension (+)
- Hospitalization (+): Vein thrombosis
- Drug: anticoagulant for 1 week
- Denied any drug or food allergy

Past dental history

- Extraction of tooth 22



PERSONAL HABIT

- **Smoking : quit for a long time**
- **Alcohol : quit for a long time**
- **Betel quid : none**



EXTRAORAL EXAMINATION

Unknown

INTRAOURAL EXAMINATION

Upper ant. region
(incisive papilla and 14~25)



1. **Size : 2cmX4cm**
2. **Surface : ulcerative**
3. **Base : sessile**
4. **Shape : polypoid**
5. **Color : white and red**
6. **Consistency : soft**
7. **Mobility: fixed**
8. **Fluctuation : (-)**
9. **Induration : (-)**
10. **Pain : (+)dull**
11. **Tenderness : (-)**

INTRAOURAL EXAMINATION

Soft palate region



1. **3cmx4cm**
2. **Surface : ulcerative**
3. **Base : sessile**
4. **Shape : polypoid**
5. **Color : white and red**
6. **Consistency : soft**
7. **Mobility: fixed**
8. **Fluctuation : (-)**
9. **Induration : (-)**
10. **Pain : (+)dull**
11. **Tenderness : (-)**

INTRAOURAL EXAMINATION



Tooth 22 extraction wound

Surface: ulcerative

Color: yellow

Buccal side of tooth 22-26

Surface: ulcerative

(病歴記載但無照片)

INTRAOURAL EXAMINATION



Tongue region

**Multiple removable
white patches**





INTRAOURAL EXAMINATION

Dental findings :

- 1. Caries : 16 、 14 、 23 、 26 、 33**
- 2. Missing : 18 、 11 、 21 、 22 、 28 、
46 、 47 、 48**
- 3. Residual root : 34 、 32 、 45**




WORKING DIAGNOSIS

1.

- Upper ant. region (incisive papilla and 14~25)
- Soft palate region

2.

- Tongue region



**Upper ant. region (incisive
papilla and 14~25) & Soft palate**

WORKING DIAGNOSIS

Inflammation / Cyst / Neoplasm

- Redness : (+)
- Swelling : (+)
- Pain : (+) → inflammation
- Multifocal ulcerative lesions → infection
- Epithelial-lined cavity : (-) & Fluctuation : (-) → R/O cyst
- Unhealing extraction wound for 2~3 month
- Polypoid shape 、 Sessile base 、 fixed
→ Neoplasm



Infection / Neoplasm

WORKING DIAGNOSIS

Benign	Malignant
<ol style="list-style-type: none">1. Movable (except palate)2. Unattached to skin or mucosa (except palate)3. No ulceration of skin or mucosa4. Slow growth, Long duration5. No pain6. No facial nerve palsy7. No bony invasion8. Well-defined radiolucency with corticated margin	<ol style="list-style-type: none">1. Induration2. Fixed to overlying skin or mucosa3. Ulceration of skin or mucosa4. Rapid growth; growth spurt, Short duration5. Pain, often severe6. Facial nerve palsy (little numbness over lingual)7. Bony invasion8. Ill-defined radiolucency without corticated margin



WORKING DIAGNOSIS

Benign/Malignant

- Duration : 2-3 months
- Fixed ulcerative surface
- Ulcerative polypoid lesion



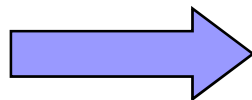
Malignant



WORKING DIAGNOSIS

Central or peripheral origin

- No X-ray information
- Lesion appear on soft tissue surface



Peripheral origin



DIFFERENTIAL DIAGNOSIS-

Neoplasm

Origin	Disease
Epithelial	Squamous cell carcinoma Spindle cell carcinoma Adenosquamous carcinoma
Metastasis	Metastases to the oral soft tissue



DIFFERENTIAL DIAGNOSIS-

Infection

Infective Disease

Tuberculosis

Histoplasmosis

Pemphigus vulgaris

Major aphthous ulcer (immunocompromised)

Necrotizing ulcerative mucositis

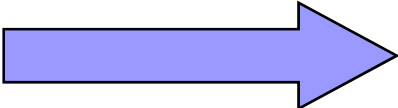


Tongue region



WORKING DIAGNOSIS

- Multiple removable white patches

 infection

DIFFERENTIAL DIAGNOSIS — —

1. **Candidiasis**
2. **Lichen planus**



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Epithelial Origin

Squamous cell carcinoma

Spindle cell carcinoma

Adenosquamous carcinoma

Squamous cell carcinoma



Figure 10-102 • Squamous cell carcinoma. An ulcerated or endophytic lesion of the tongue.



Figure 10-113 • Squamous cell carcinoma. Large, ulcerated lesion of the right lateral soft palate.

	Squamous cell Carcinoma (central type)	Our case
Gender	Male : Female = 3 : 1	Male
Age	Mostly 40-80 yrs or older	82
Race	Not significant	Asian
Site	On the lip, floor or roof of the mouth, tongue, soft and hard palate ,gum	Anterior hard palate & Soft palate
Size	Random	2X4 cm
Color	Pink, white, red or white & red	White & red



symptom	<ol style="list-style-type: none">1. Painless or pain2. Firm3. Varied clinical presentation-<ol style="list-style-type: none">1) Exophytic (mass-forming; fungating; papillary; verruciform)2) Endophytic (invasive, burrowing, ulcerated)3) Leukoplakic (white patch)4) Erythroplakic (red patch)5) Erythroleukoplakic (combined red-and-white patch)	<ol style="list-style-type: none">1. dull pain2. ulcerative surface3. sessile base4. polypoid shape5. soft consistency6. fluctuation (-)7. fixed8. tenderness (-)9. induration (-)10. lymphadenopathy (-)
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DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Epithelial Origin

Squamous cell carcinoma

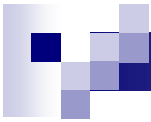
Spindle cell carcinoma

Adenosquamous carcinoma

Spindle cell carcinoma



Figure 10-124 • Spindle cell carcinoma. Ulcerated mass of the maxillary alveolar ridge. (Courtesy of Dr. Michael Robinson.)



	Spindle cell carcinoma	Our case
Frequency	Rare variant of SCC	
Age	29~93 y/o	82 y/o
Sex	No sex predilection	Male
Location	Parynx 、 oral cavity 、 esophagus Lower lip 、 lateral posterior tongue 、 alveolar ridge	Parynx 、 alveolar ridge 、 lateral side of tongue
Appearance	Common : pedunculated or polypoid mass 、 ulceration Occasionally : sessile 、 nodule Red color	Polypoid(Parynx) 、 sessile 、 ulceration Red color
Symptom	Growing rapidly	



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Epithelial Origin

Squamous cell carcinoma

Spindle cell carcinoma

Adenosquamous carcinoma

	Adenosquamous carcinoma	Our case
Frequency	Rare variant of SCC	
Age	Older adults	82y/o
Sex	No sex predilection	male
Location	Tongue 、 oral floor 、 other mucosal surface	Larynx 、 alveolar ridge 、 lateral side of tongue
Appearance	Nodule	Polypoid(larynx) 、 sessile 、 ulceration
Symptom	Painless 、 metastatic deposits within the neck nodes	Dull pain 、 lymphadenopathy(-)



Differentiation Diagnosis

Upper ant. region (incisive papilla and 14~25) & Soft palate

Metastasis

**Metastatic tumors
to the oral soft tissue**

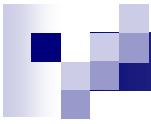
Metastatic tumors to the oral soft tissue



Figure 12-142 • Metastatic adenocarcinoma of



of the colon. A, Focal swelling of the left retro-
Note the marked enlargement of the



	Metastatic tumors to the oral cavity	Our case
Gender	Male > Female	Male
Race	Not significant	Asian
Age	Middle-aged and older adults	82y/o
Site	Gingiva-50% Tongue-25%	Extraction wound of 22 Hard & soft palate Tongue

Symptom	<ul style="list-style-type: none"> · The lesion usually appear as a nodular mass that often resembles a hyperplastic or reactive growth · Occasionally , the lesion appears as a surface ulceration · Adjacent teeth may become loosened by an underlying destruction of the alveolar bone 	<ul style="list-style-type: none"> · The extraction wound did not heal · Ulceration over hard palate · Pain when swallowing and could not eat · Base : sessile · Surface : ulcerative · Color : yellow/red · Pain : (+) · Fluctuation : (—) · Mobility : fixed · Tenderness : (—) · Induration : (—) · Lymphadenopathy (-)
Primary lesion	<ul style="list-style-type: none"> · Any malignancy from the body site is capable of metastasis to the oral cavity - Male : lung cancer - Female : breast cancer 	<p>The patient should receive further systemic examination</p>



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Infection

Tuberculosis

Histoplasmosis

Pemphigus vulgaris

Major aphthous ulcer

Necrotizing ulcerative mucositis

Tuberculosis



	Tuberculosis (oral lesion)	OUR CASE
Gender	No specific	Male
Age	Old (reactivation)	82
Frequency	more 1 billion worldwide; 0.5%~1.5% oral lesion presented	
symptom	Painless lesion, low- grade fever, malaise	Dull pain, unhealing wound, swelling
Site	Gingiva, mucobuccal fold, area adjacent to inflammation teeth or extraction site, tongue, palate, and lip	Anterior hard palate & Soft palate
Size	Random	2cmX4cm(Anterior hard palate) 3cmx4cm(Soft palate)

	Tuberculosis (oral lesion)	OUR CASE
Color	Red, white	White and red
Shape	Ulcer, nodular, granular, firm leukoplakic area	Sessile base, polypoid
Induration	(-)	(-)
Surface	Ulcerative	Ulcerative
Duration		2~3 month
Tenderness	(-)	(-)
lymphadenopathy	(+)	(-)
Fluctuation	(-)	(-)



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Infection

Tuberculosis

Histoplasmosis

Pemphigus vulgaris

Major aphthous ulcer

Necrotizing ulcerative mucositis

Histoplasmosis(disseminated type)





	Histoplasmosis (disseminated type)	OUR CASE
Gender	No specific	Male
Age	Older patient	82
Frequency	2% to 10% with AIDS	
symptom	Firm, painful, ulceration, similar to malignant clinically	Dull pain, ulceration, unhealing wound, swelling
Site	Lung, tongue, palate, buccal mucosa	Anterior hard palate & Soft palate
Size	Random	2cmX4cm(Anterior hard palate) 3cmx4cm(Soft palate)

	Histoplasmosis(disseminated type)	OUR CASE
Color	Red, white	White and red
Shape	Rolled margin, solitary	Sessile base, polypoid
Induration	(-)	(-)
Surface	Irragular ,ulceration	Ulcerative
Duration	Several weeks	2~3 month
Tenderness		(-)
lymphadenopathy	(+)	(-)
Fluctuation	(-)	(-)



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Infection

Tuberculosis

Histoplasmosis

Pemphigus vulgaris

Major aphthous ulcer

Necrotizing ulcerative mucositis

Pemphigus vulgaris



	Pemphigus vulgaris	OUR CASE
Gender	No sex predilection	Male
Age	50-average age	82
Frequency	One to five cases per million people each year	
symptom	Oral soreness, erosions and ulcerations distributed haphazardly on the oral mucosa, positive Nikolsky sign	Dull pain, unhealing wound, swelling
Site	Any oral mucosal location	Soft palate
Size	Depends on the lesion being infected	2cmX4cm(anterior gingiva from 14~25) 3mm in diameter(ulcer over hard palate) 3cmx4cm(Soft palate-total ulcerative lesion)

	Pemphigus vulgaris	OUR CASE
Color	Red	Red and yellow
Shape	Ulcer, irregular	Sessile base, polypoid
Induration	(-)	(-)
Surface	Ulcerative	Ulcerative
Duration	Autoimmune disease, the duration of the disease is related to the treatment taken to treat the disease	2~3 month
Tenderness	(+)	(-)
lymphadenopathy	(-)	(-)
Fluctuation	(-)	(-)



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Infection

Tuberculosis

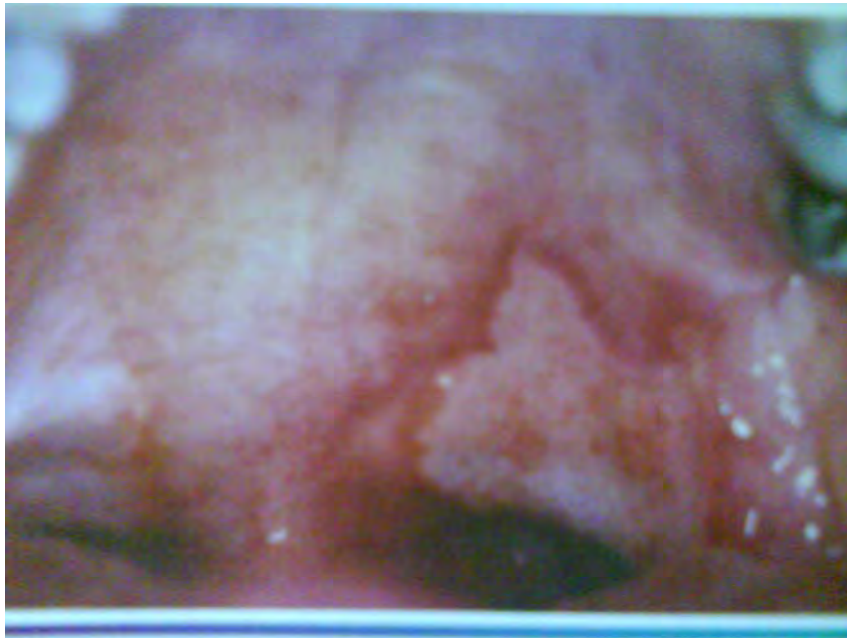
Histoplasmosis

Pemphigus vulgaris

Major aphthous ulcer

Necrotizing ulcerative mucositis

Major aphthous ulcer



	major aphthous ulcer	OUR CASE
Gender	Female	Male
Age	The onset of major aphthous ulcer is after puberty	82
symptom	The lesions may be preceded by prodromal symptoms of burning,itching,or stinging,with the development of an erythematous macule	Dull pain, unhealing wound, swelling
Site	Any surface , but the labial mucosa , soft palate , tonsillar fauces are the most commonly affected sites	Soft palate
Size	1~3cm in diameter	2cmX4cm(anterior gingiva from 14~25) 3mm in diameter(ulcer over hard palate) 3cmx4cm(Soft palate-total ulcerative lesion)

	major aphthous ulcer	OUR CASE
Color	Red, yellow	Red,yellow
Shape	Ulcer, irregular	Sessile base, polypoid
Induration	(-)	(-)
Surface	Ulcerative	Ulcerative
Duration	Taking from 2~6 weeks to heal , but the recurrent episodes may continue to develop for up to 20 years or more	2~3 month
Tenderness	(+)	(-)
lymphadenopathy	(-)	(-)
Fluctuation	(-)	(-)



DIFFERENTIAL DIAGNOSIS

Upper ant. region (incisive papilla and 14~25) & Soft palate

Infection

Tuberculosis

Histoplasmosis

Pemphigus vulgaris

Major aphthousulcer

Necrotizing ulcerative mucositis

Necrotizing ulcerative mucositis



	Necrotizing ulcerative mucositis	OUR CASE
Gender	Not specific	Male
Age	Young (1~10 y/o)	82
Frequency	140,000 worldwide per year	
symptom	Significant pain, fever, malaise, and regional lymphadenopathy	Dull pain, unhealing wound, swelling
Site	Gingiva and the adjacent soft tissue	Anterior hard palate & Soft palate
Size	Random	2cmX4cm(Anterior hard palate) 3cmx4cm(Soft palate)

	Necrotizing ulcerative mucositis	OUR CASE
Color	White, yellowish, bluish-black	White and red
Shape	Ulcerative or necrosis endophytic lesion	Polypoid
Indurations		(-)
Surface	Ulcerative, necrosis	Ulcerative
Duration		2~3 month
Tenderness	(+)	(-)
lymphadenopathy	(+)	(-)
Fluctuation	(-)	(-)



Rank The Differentiation Diagnosis

- **Tuberculosis**
- **Histoplasmosis**
- **Squamous cell carcinoma**
- **Spindle cell carcinoma**
- **Adenosquamous carcinoma**
- **Pemphigus vulgaris**
- **Major aphthous ulcer (immunocompromised)**
- **Necrotizing ulcerative mucositis**
- **Metastatic tumor to the oral soft tissue**



Clinical Impression

- **Tuberculosis**



DIFFERENTIAL

DIAGNOSIS

OF TONGUE REGION

Candidiasis

Lichen planus

Candidiasis

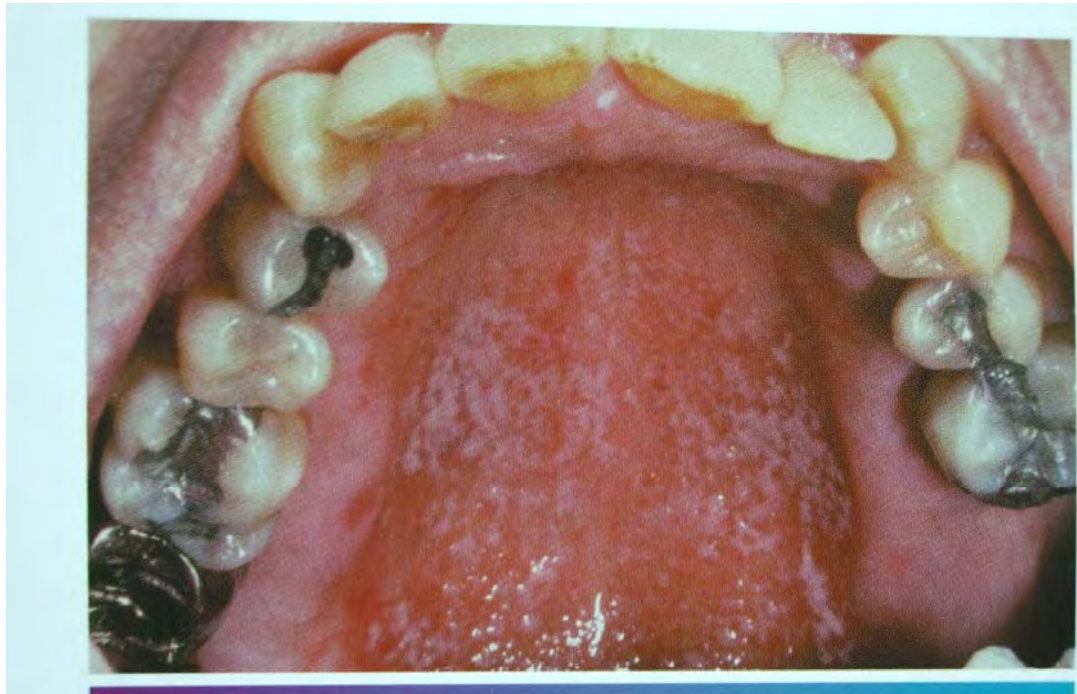
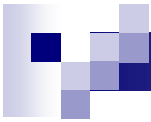


Figure 6-5 • Candidiasis. Same patient as in Figure 6-4. A “kissing” lesion of oral candidiasis involves the hard palate.



	Candidiasis	Our case
Gender	X	Male
Race	Not significant	Asian
Age	Elderly and children (immuno-compromised)	82
Size	Random	2×4 cm
Site	Buccal mucosa, tongue, palate , angles of month, denture-bearing area	Anterior hard palate & soft palate
Color	White, red	White & red



	candidiasis	Our case
Symptom	<ol style="list-style-type: none">1. White plaque (removable or not removable)2. Red macules, burning sensation3. Atrophic mucosa4. Foul taste5. Asymptomatic6. Systemic compromised	<ol style="list-style-type: none">1. dull pain2. ulcerative surface3. sessile base4. polypoid shape5. soft consistency6. fluctuation (-)7. fixed8. tenderness (-)9. induration (-)10. lymphadenopathy (-)11. multiple removable white patch at tongue region



DIFFERENTIAL

DIAGNOSIS

OF TONGUE REGION

Candidiasis

Lichen planus

Lichen planus



	Lichen planus (oral lesion)	OUR CASE
Gender	Female	Male
Age	Middle-aged	82
Frequency	1%of population; 0.1%~2.2% oral lesion presented	
symptom	Painless lesion, low-grade fever, malaise	Dull pain, unhealing wound, swelling
Site	Lateral &dorsal tongue Gingiva, palate,vermillon border mucobuccal fold, for	Anterior hard palate & Soft palate
Size	Random	2cmX4cm(Anterior hard palate) 3cmx4cm(Soft palate)

	Lichen planus (oral lesion)	OUR CASE
Color	Red, white	White and red
Shape	Atrophic, erythematous area with central ulceration of varying degrees, bordered by fine, white radiating striae	Sessile base, polypoid
Induration	(-)	(-)
Surface	Ulcerative	Ulcerative
Duration		2~3 month
Tenderness	(-)	(-)
lymphadenopathy	(-)	(-)
Fluctuation	(-)	(-)



Clinical Impression

Of Tongue Region

- **Candidiasis**

