

Clinicopathological conference

指導老師：陳玉昆醫師

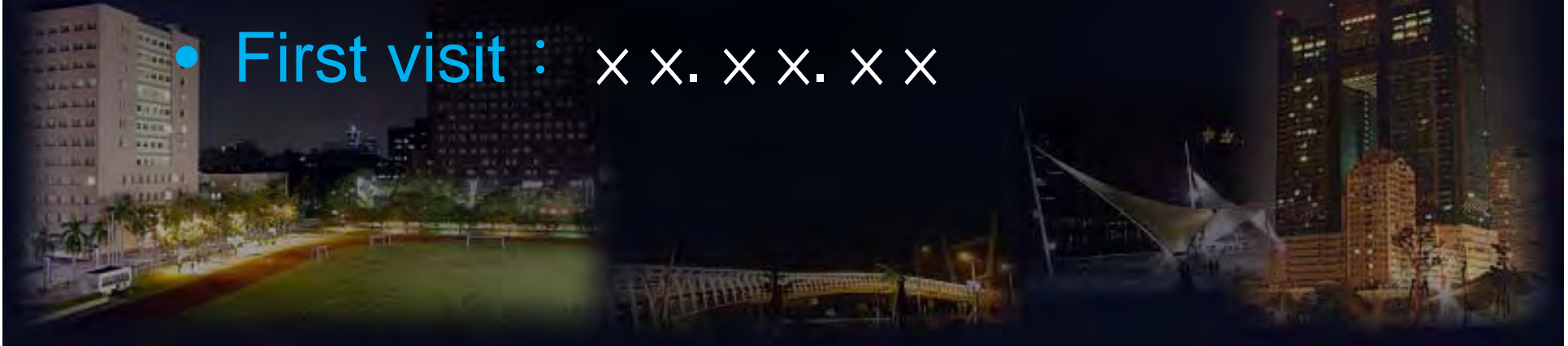
報告日期：2009.11.13

第五組：劉啓忻 蔡豐駿 葉哲瑋 顏大祐 楊承憲
林敬浦 余忠翰 陳佩娟 林聰緯 陳佳伶



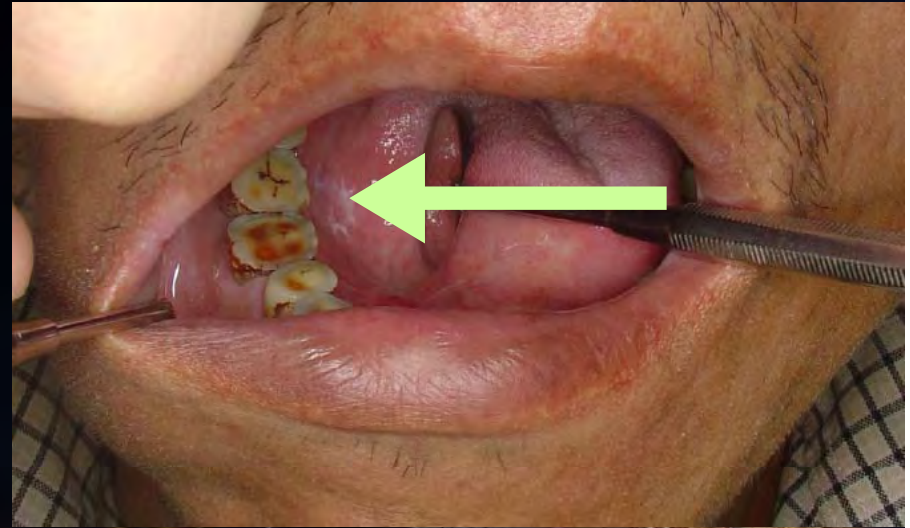
General data

- Name: 000
- Chart No: Case 1
- Sex: Male
- Age: 47 y/o
- Marital status: Yes
- Occupation: Labor
- First visit : x x . x x . x x



Chief Complaint

- ulcerative lesion over right mouth floor for two months



Present Illness

- This 47 y/o male suffered from the above episode for 2 months.
- He went to 阮綜合 hospital for further treatment.
- After oral exam, he was referred to our OPD for further evaluation and treatment.



Extraoral Examination

- No facial asymmetry
- Lymphadenopathy(—)



Intraoral Examination(1)

- There is a dome-shaped ulceration over right floor mouth, about 2.0x2.0 cm in diameter.



Intraoral Examination(2)

- There is a white lesion over the right side of the tongue.



Intraoral Examination(3)

Size	2.0x2.0cm
Surface	Rough
Base	Sessile
Shape	Dome
Color	Red
Consistency	Soft

Intraoral Examination (4)

Fluctuation	—
Mobility	—
Pain	—
Tenderness	—
Induration	+
Lymphadenopathy	—

Intraoral Examination (5)

- Food impaction
- Plaque or calculus deposition
- Dental finding – missing teeth : 27,28,36



Past History

- Past Medical History
 - Denied any systemic disease
 - Denied any allergic reaction
 - Hospitalization history(+):胃穿孔
- Past Dental History
 - Denied any dental treatment



Personal Habits

- Alcohol (+): > 20 years.
- Betel-quid (+): 30~40/day, > 20 years.
- Cigarette (+): 1.5 pack/day, > 20 years.



Differential Diagnosis



red
lesion

inflammation

neoplasm



Inflammation or Neoplasm?



Inflammation

	Our case	Inflammation
Color	Red	Red
Fever or local heat	—	+
Pain	—	+
Tender	—	+
Purulent drainage	—	+
Bleeding tendency	—	+
Swelling	—	+
Duration	2 months	Days

RULE OUT INFLAMMATION !



Neoplasm

	Our case		Neoplasm
Mobility	Fixed		Fixed/movable
Induration	+	★	+
Ulceration	+	★	+
Duration	2 months	★	Months



Neoplasm !



Red
Lesi on

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neopl asm

beni gn

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Benign or Malignant?

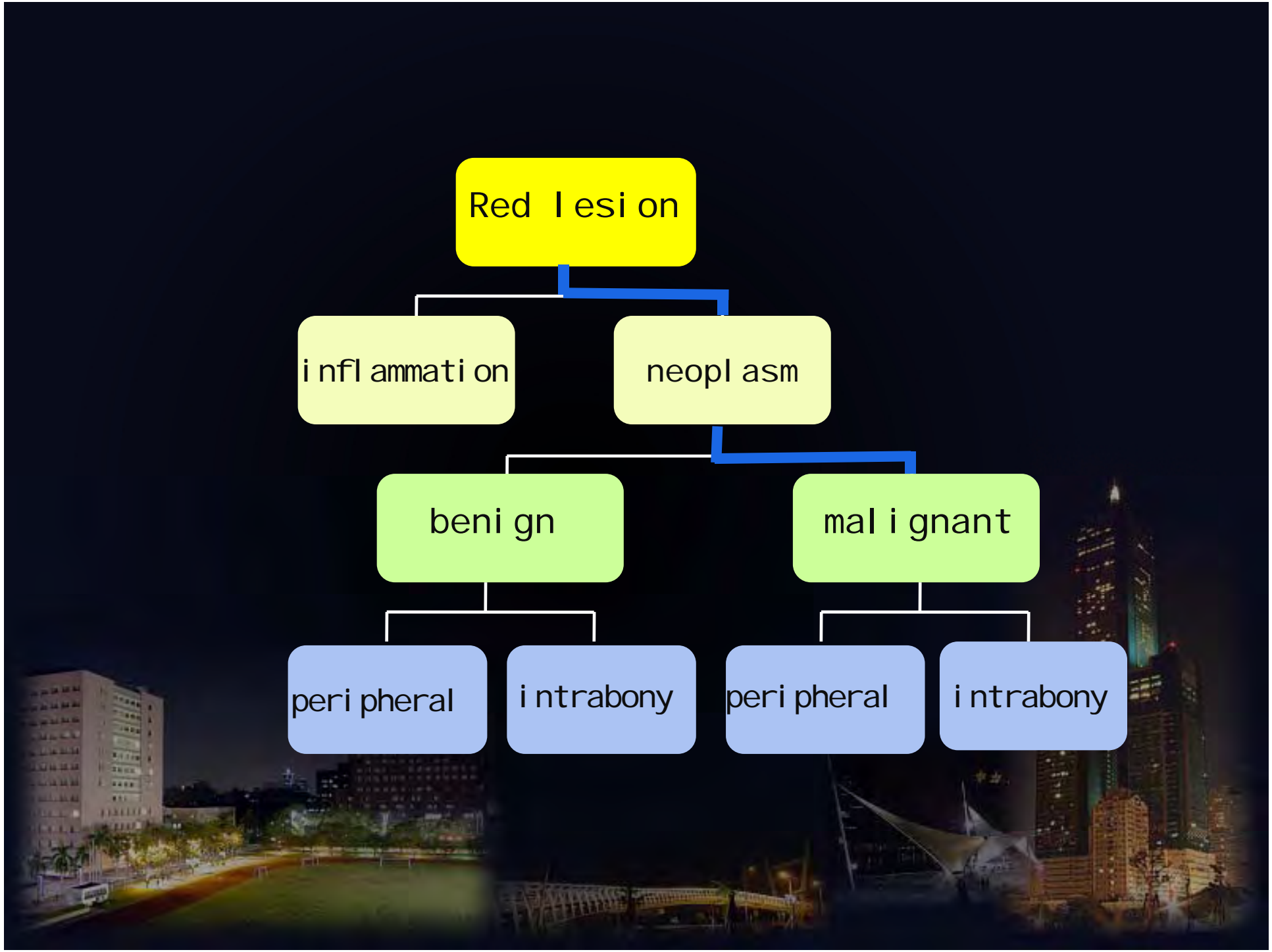
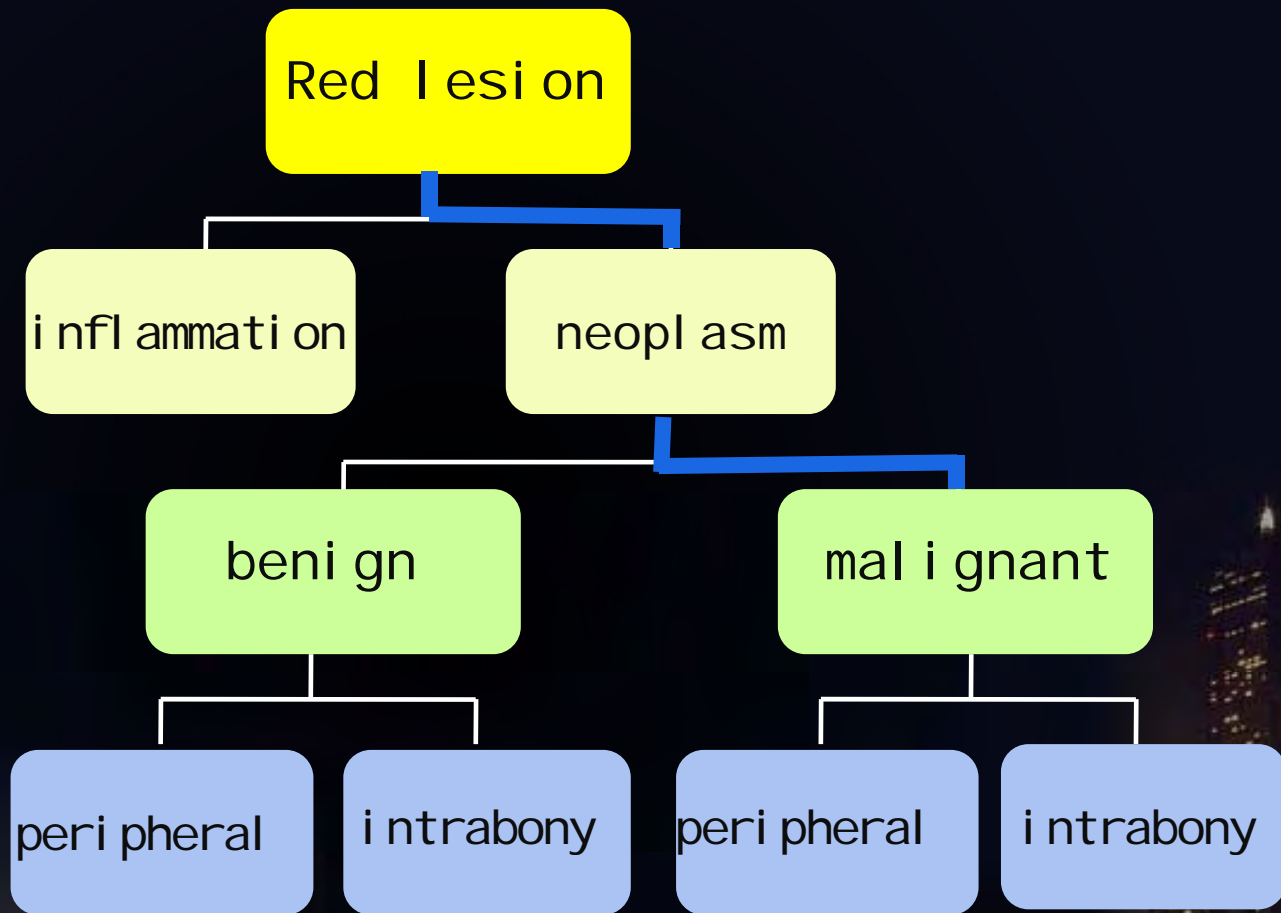


	Benign	Our case	Malignant
Pain	— 	—	+
Tenderness	— 	—	+
Lymphadenopathy	— 	—	+
Ulceration	—	+	 +
Induration	—	+	 +
Surface	Smooth	Rough	 Rough
Mobility	Free	Fixed	 Fixed
Duration	Years	2 Months	 Months



Malignant !





Peripheral or Intrabony origin?



- Adjacent mucosa seems abnormal appearance
- No X-Ray information

	Peripheral	Our case	Intrabony
Mucosa ulceration	+	+	-/+
Induration	+	★	-
Consistency	Soft	★	Firm
Mobility	Fixed	Fixed	Fixed



Peripheral !



Working Diagnosis



Lesion

inflammation

neoplasm

benign

malignant

epithelial

sarv
gland

Connective
tissue

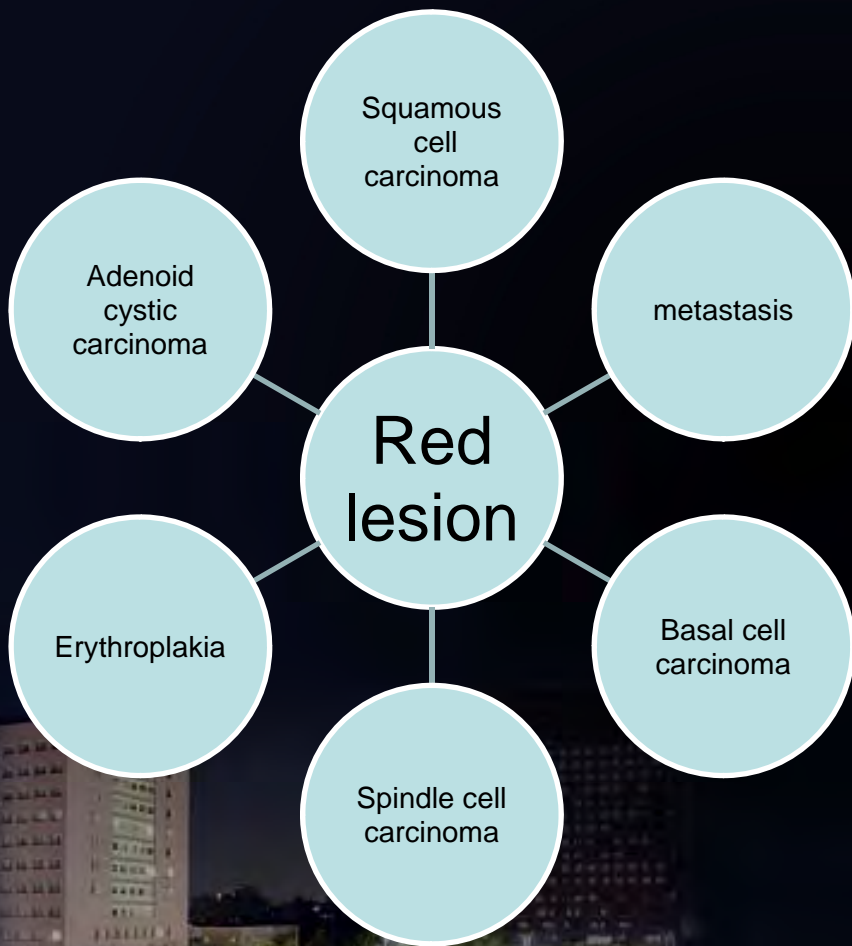
bone

Working Diagnosis

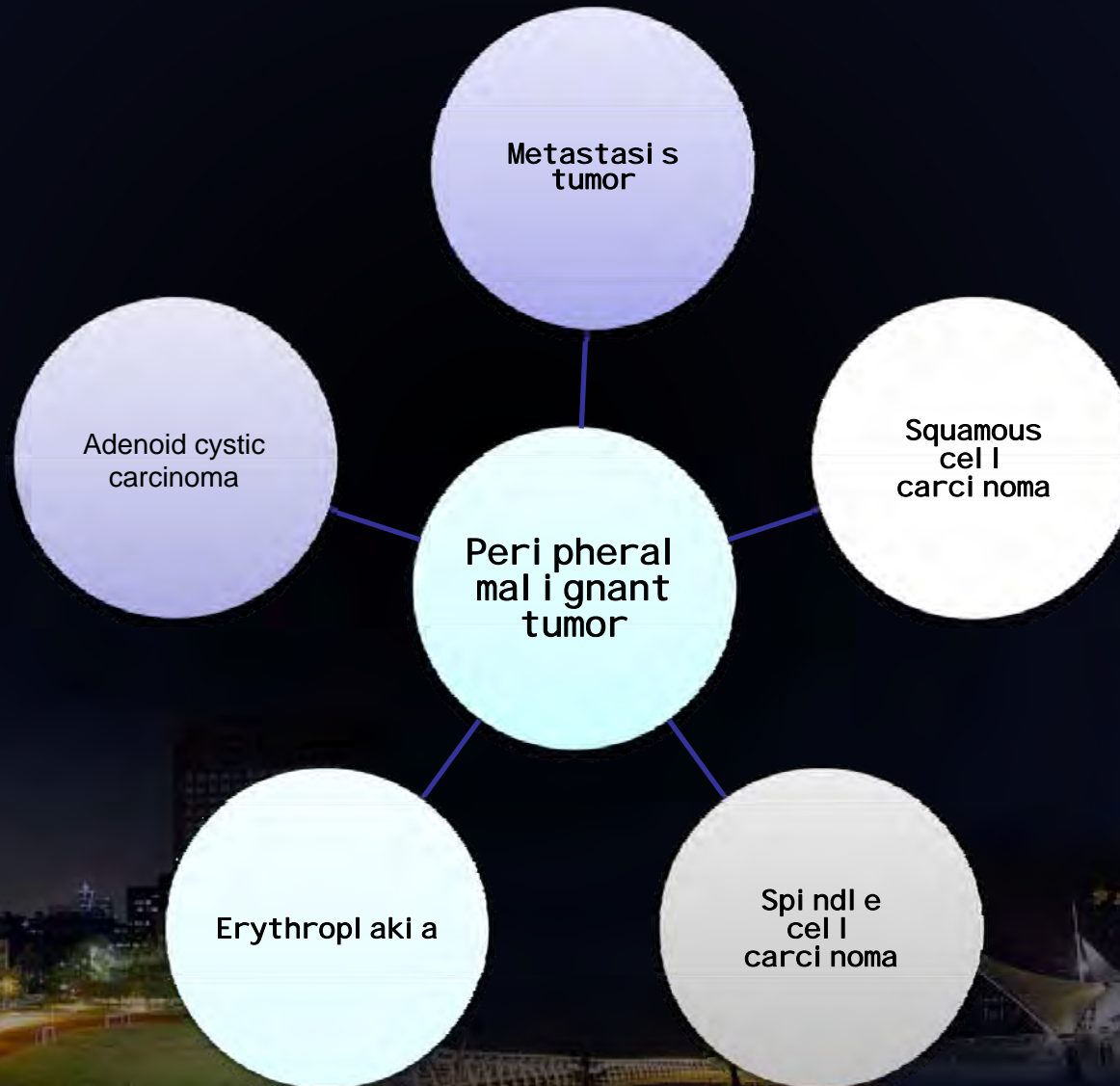
Malignant neoplasm







Working Diagnosis



Squamous Cell Carcinoma



Squamous Cell Carcinoma

- Etiology and pathogenesis :

1. leukoplakia → SCC
2. Etiology : ABC factor 、 phenol 、 radiation 、 syphilis 、 nutrition deficiency 、 candidias 、 immunosuppression 、 gene-associated

- Clinical features :

1. rapid growth
2. maybe bone or nerve destruction

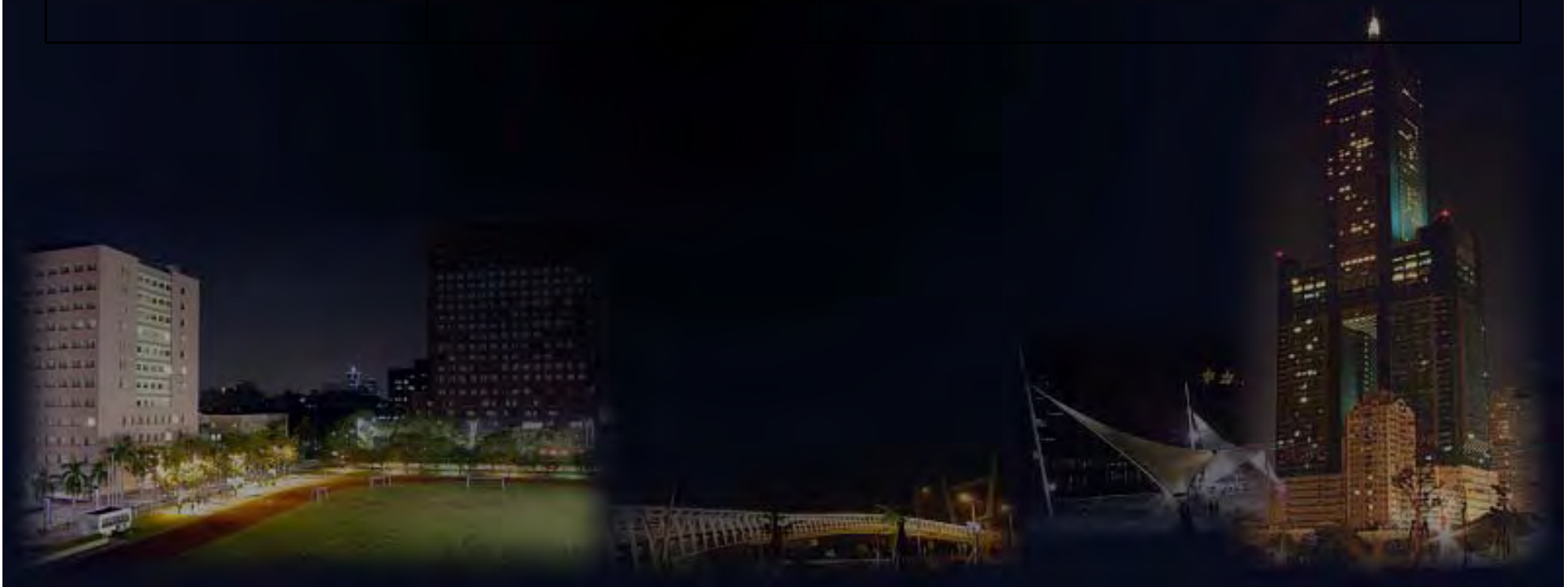
	Our case	Squamous cell carcinoma
Gender	Male	Male
Age	47	age ↑
Site	Floor of the tongue	Buccal mucosa >tongue>lower lip
Size	2*2cm	Variable



	Our case	SCC
Surface	Rough	Rough
Base	Sessile	Sessile
Shape	Dome	variable
Color	Red	Most White
consistency	soft	hard
Fluctuation	—	—
Mobility	—	—

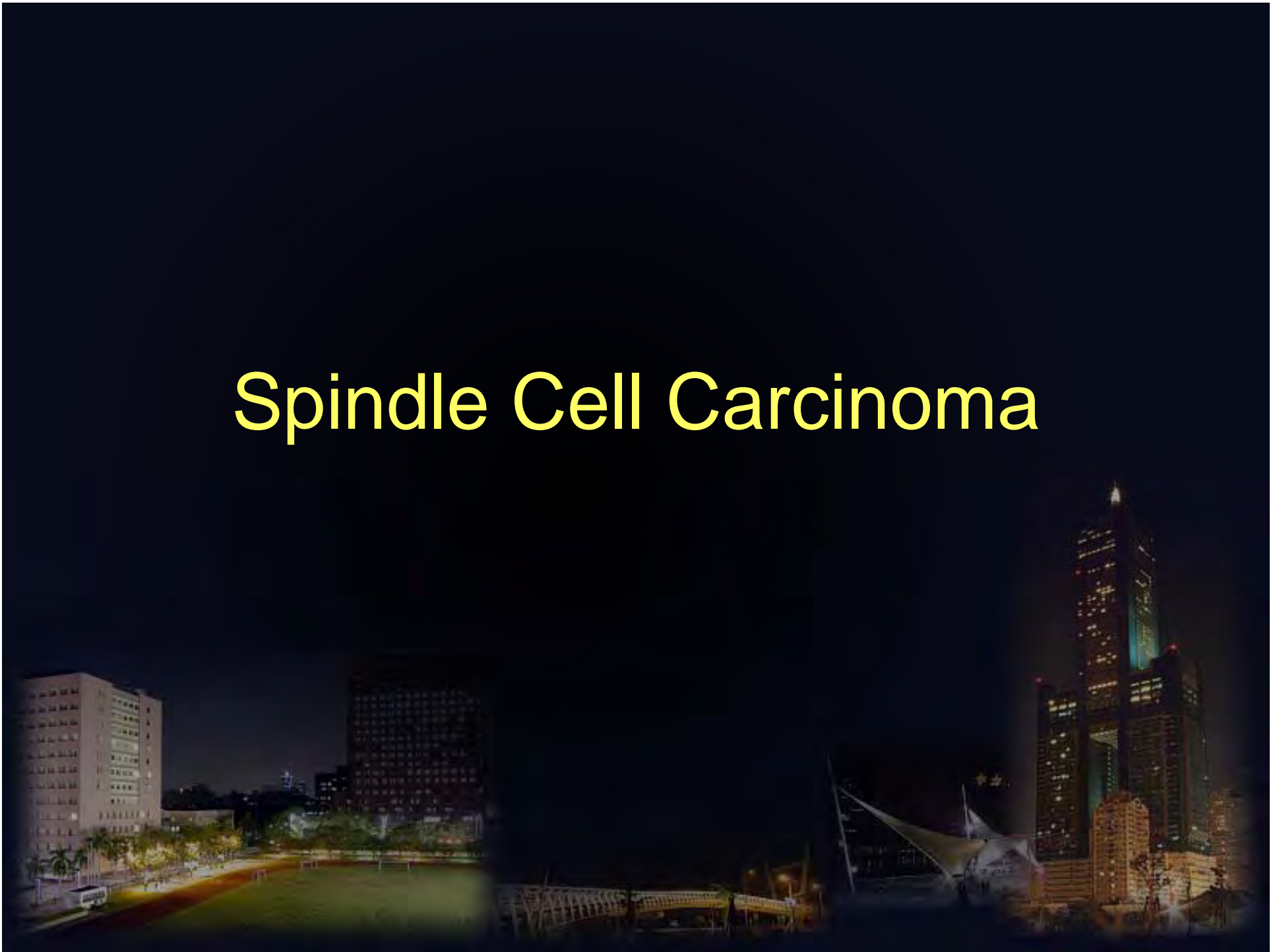


	Our case	SCC
Pain	-	+ / -
Tenderness	-	+
Induration	+	+
LAP	-	+



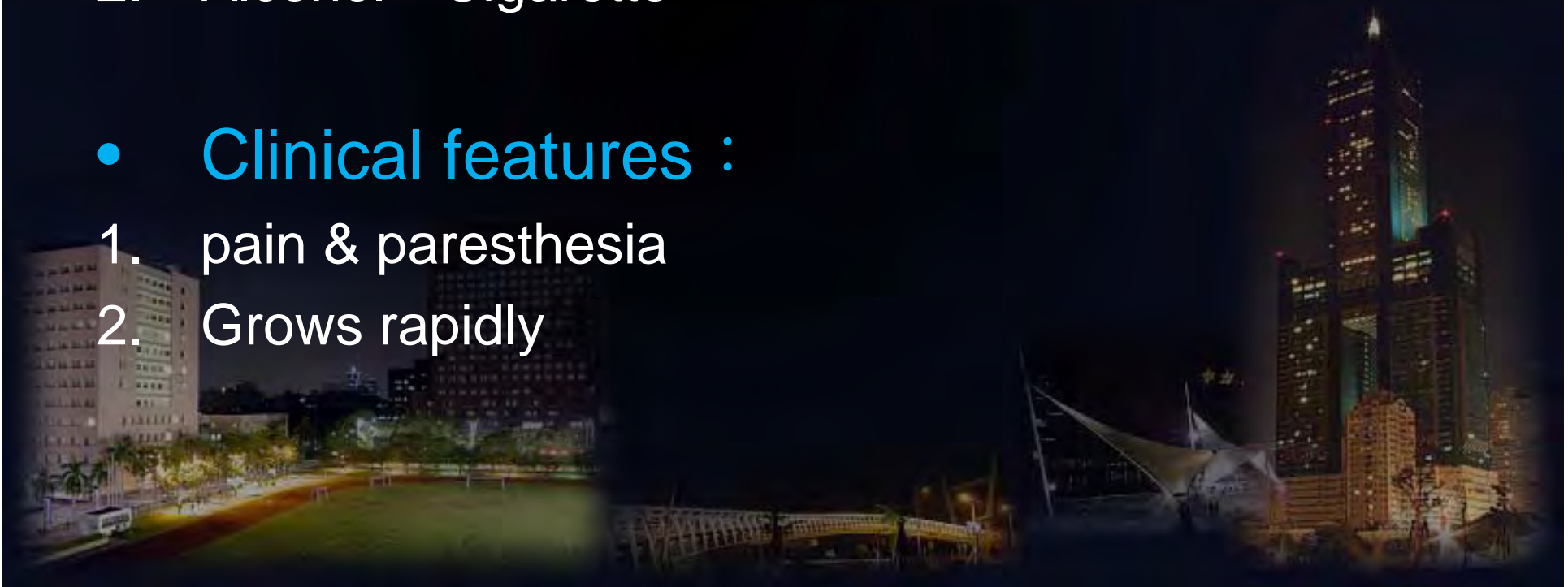
	Our case	Squamous cell carcinoma
Gender	Male	Male
Age	47	age
Site	Tongue floor	Buccal mucosa >tongue>lower lip
Size	2*2cm	variable
Surface	Rough	Rough
Base	Sessile	Sessile
Shape	Dome	variable
Color	Red	Most White
consistency	soft	hard
Fluctuation	-	-
Mobility	-	-
Pain	-	- /+
Tenderness	-	+
Induration	+	+
Lymphadenopathy	-	+

Spindle Cell Carcinoma



Spindle Cell Carcinoma

- Etiology and pathogenesis :
 1. Dysplastic squamous epithelium + invasive spindle cell element
 2. Alcohol 、 Cigarette
- Clinical features :
 1. pain & paresthesia
 2. Grows rapidly



	Our case	Spindle Cell Carcinoma
Gender	Male	No sex predilection
Age	47	57(29~93)
Site	Floor of the tongue	Lower lip Lateral post. tongue alveolar ridge
Size	2*2cm	Small but grow rapidly



	Our case	Spindle Cell Carcinoma
Surface	Rough	Rough
Base	Sessile	Pedunculated
Shape	Dome	Polypoid
Color	Red	Red
consistency	Soft	Unknown
Fluctuation	-	Unknown
Mobility	Fixed	Unknown



	Our case	Spindle Cell Carcinoma
Pain	—	+
Tenderness	—	+
Induration	+	+
LAP	—	+



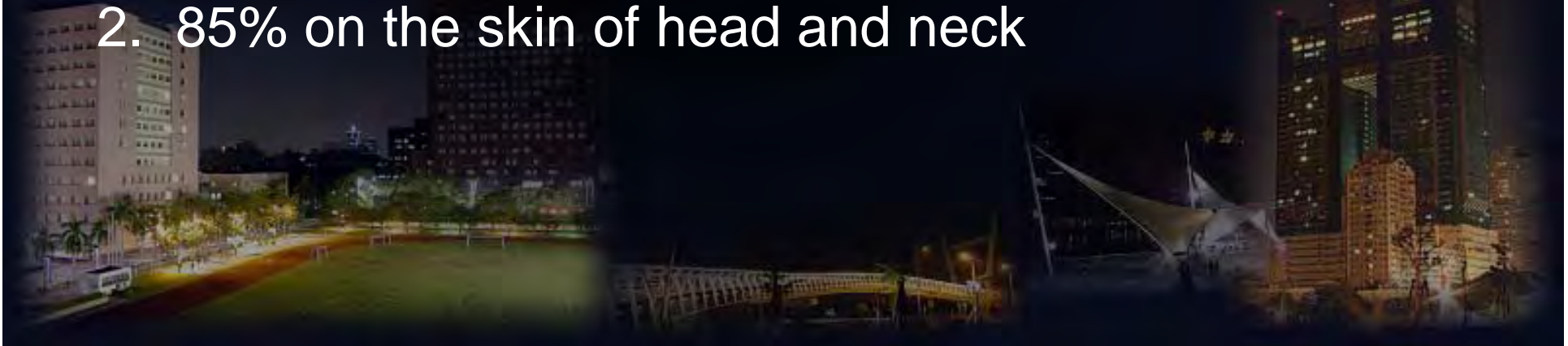
	Our case	Spindle Cell Carcinoma
Gender	Male	No sex predilection
Age	47	57(29~93)
Site	Floor of the tongue	Parynx 、 oral cavity 、 Esophagus 、 Lower lip 、 lateral posterior tongue alveolar ridge
Size	2*2cm	Small but grow rapidly
Surface	Rough	Rough
Base	Sessile	Pedunculated
Shape	Dome	Polypoid
Color	Red	Red
consistency	soft	Unknown
Fluctuation	-	Unknown
Mobility	Fixed	Unknown
Pain	-	+
Tenderness	-	+
Induration	+	+
Lymphadenopathy	-	+

Basal Cell Carcinoma



Basal Cell Carcinoma

- Etiology and pathogenesis :
 1. Locally invasive, slow-spreading primary epithelial malignancy that arise from the basal cell layer of the skin
- Clinical features
 1. Mostly white (most with fair complexions)
 2. 85% on the skin of head and neck



	Our case	Basal Cell Carcinoma
Gender	Male	Male
Age	47	>40
Site	Tongue floor	Head & neck skin
Size	2*2cm	<1cm



	Our case	Basal Cell Carcinoma
Surface	Rough	Rough
Base	Sessile	Sessile
Shape	Dome	Nodule
Color	Red	Pigment
Consistency	Soft	Firm
Fluctuation	—	—
Mobility	—	—



	Our case	Basal Cell Carcinoma
Pain	—	Unknown
Tenderness	—	Unknown
Induration	+	+
LAP	—	Unknown



	Our case	Basal cell Carcinoma
Gender	Male	Male
Age	47	>40
Site	Floor of the tongue	Skin
Size	2*2cm	<1 cm
Surface	Rough	Rough
Base	Sessile	Sessile
Shape	Dome	Nodule
Color	Red	Pigmented
Consistency	soft	Firm
Fluctuation	-	-
Mobility	Fixed	Fixed
Pain	-	Unknown
Tenderness	-	Unknown
Induration	+	+
Lymphadenopathy	-	Unknown

Metastatic tumor to the oral cavity



Metastatic tumor to the oral cavity

- Etiology and pathogenesis :
 1. The prognosis is grave
 2. Other cancer



- **Clinical features :**

1. Variable sites

2. jawbones, M:F=1:1

- oral mucosa, M:F=2:1

3. In the oral soft tissues, most patients complain of a **lump**

4. male : lung > kidneys > prostate > bone > skin.

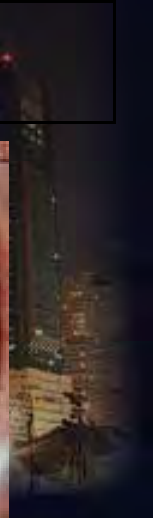
5. oral region is an uncommon site for metastatic tumor



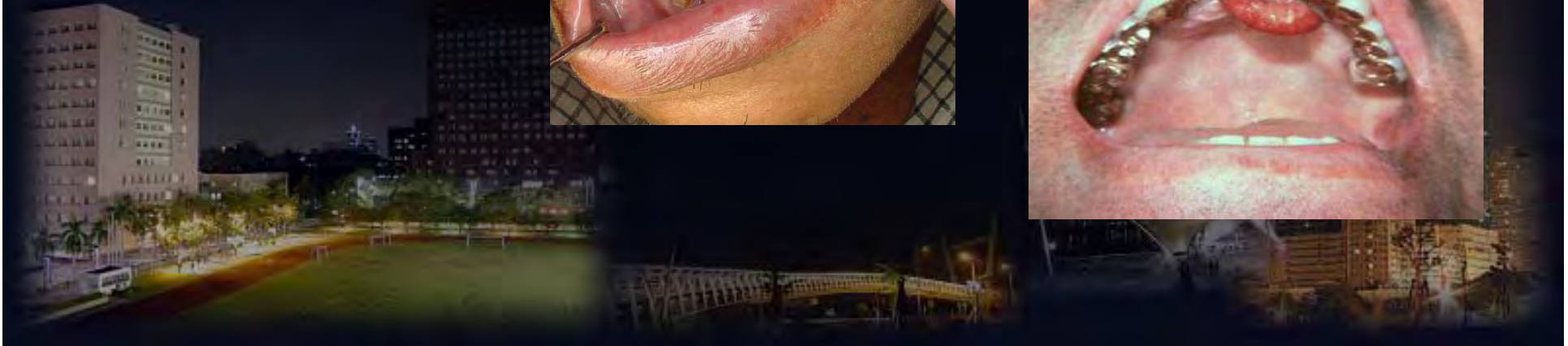
	Our case	Metastatic tumor
Gender	Male	Male
Age	47	40-70
Site	Tongue floor	gingiva > tongue
Size	2*2cm	Variable



	Our case	Metastatic tumor
Surface	Rough	Ulceration (bleeding)
Base	Sessile	Unknown
Shape	Dome	Nodule
Color	Red	Variable
consistency	Soft	Soft
Fluctuation	—	—
Mobility	—	Unknown



	Our case	Metastatic tumor
Pain	—	+
Tenderness	—	+
Induration	+	Unknown
LAP	—	Unknown



	Our case	Metastatic tumor to the oral cavity
Gender	Male	Male
Age	47	40-70
Site	Floor of the tongue	gingiva > tongue
Size	2*2cm	Variable
Surface	Rough	Ulceration (bleeding)
Base	Sessile	unknown
Shape	Dome	Nodule
Color	Red	Variable
Consistency	Soft	Soft
Fluctuation	-	-
Mobility	-	Unknown
Pain	-	+
Tenderness	-	+
Induration	+	Unknown
Lymphadenopathy	-	Unknown

Adenoid cystic carcinoma

- Etiology and pathogenesis :

1. The adenoid cystic carcinoma is one of the most common and well-recognized salivary malignant tumor.

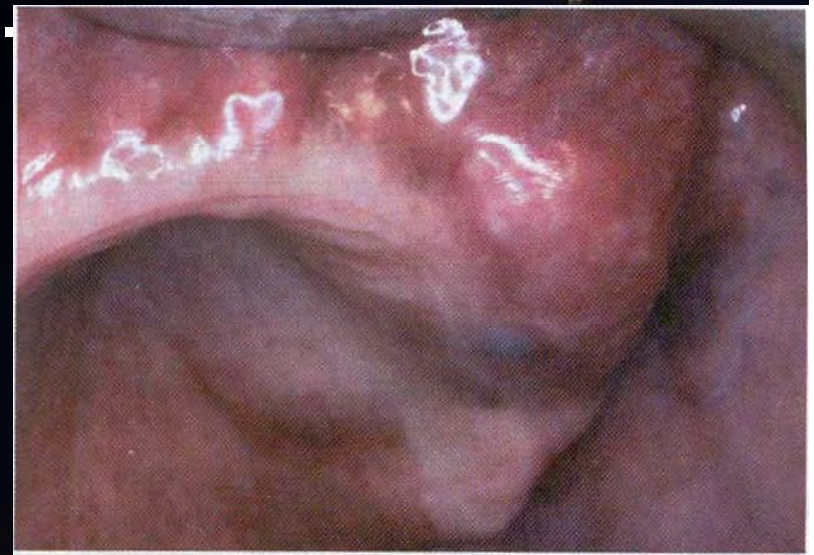


Figure 11-68 ♦ Adenoid cystic carcinoma. Painful mass of the hard palate and maxillary alveolar ridge. (Courtesy of Dr. George Blozis.)

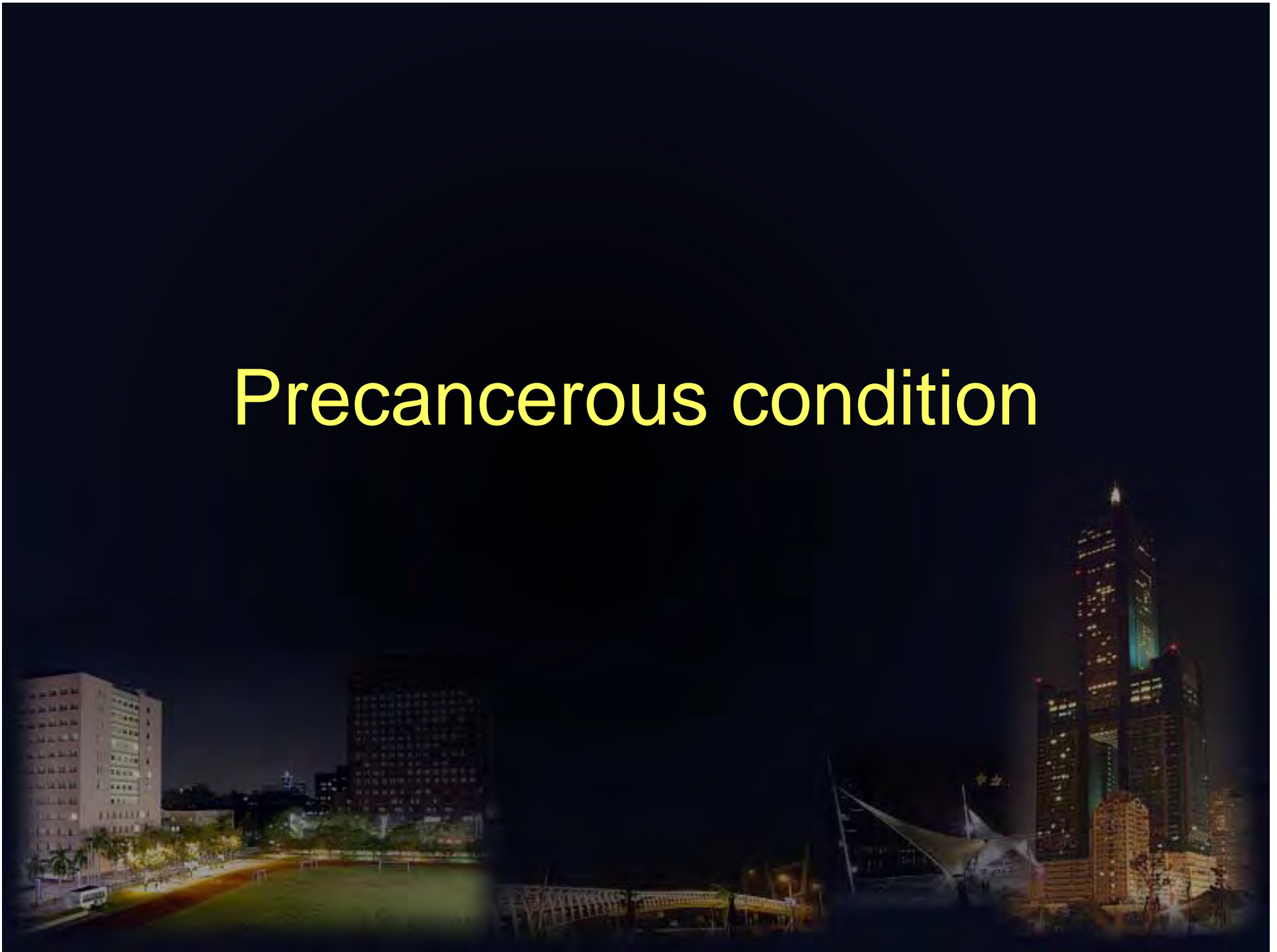


	Our case	Adenoid cystic carcinoma
Gender	Male	Unknow
Age	47	Middle age
Site	Floor of the tongue	Minor salivary gland(50% in palate) > Parotid gland = Submandibular gland
Size	2*2cm	Variable
Surface	Rough	Smooth or ulcerated
Base	Sessile	Unknown
Shape	Dome	Unknown
Color	Red	Unknown
Consistency	Soft	Unknown
Fluctuation	-	Unknown
Mobility	-	Unknown
Pain	-	+
Tenderness	-	Unknown
Induration	+	Unknown
Lymphadenopathy	-	Unknown

Discussion



Precancerous condition



Precancerous condition

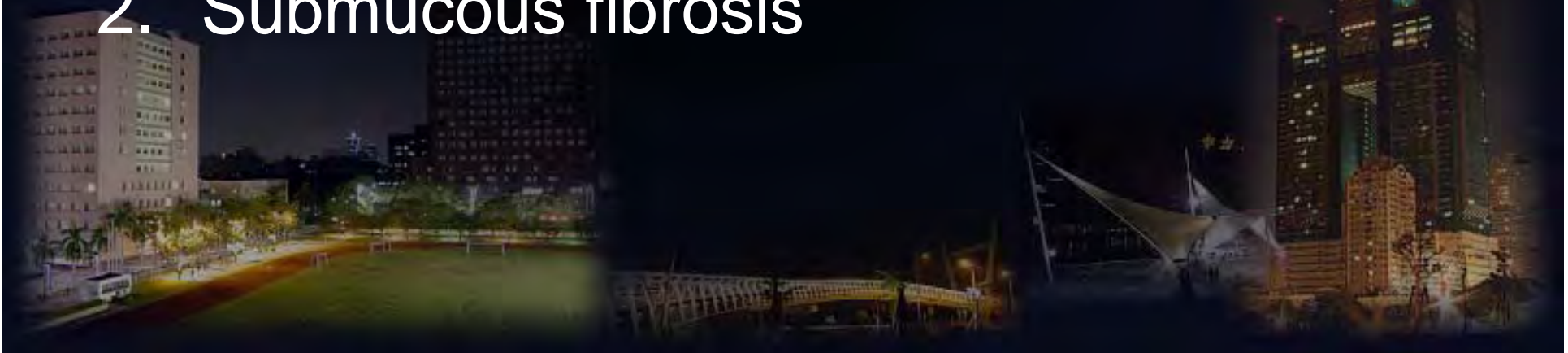
Red lesion-

1. Erythroplakia

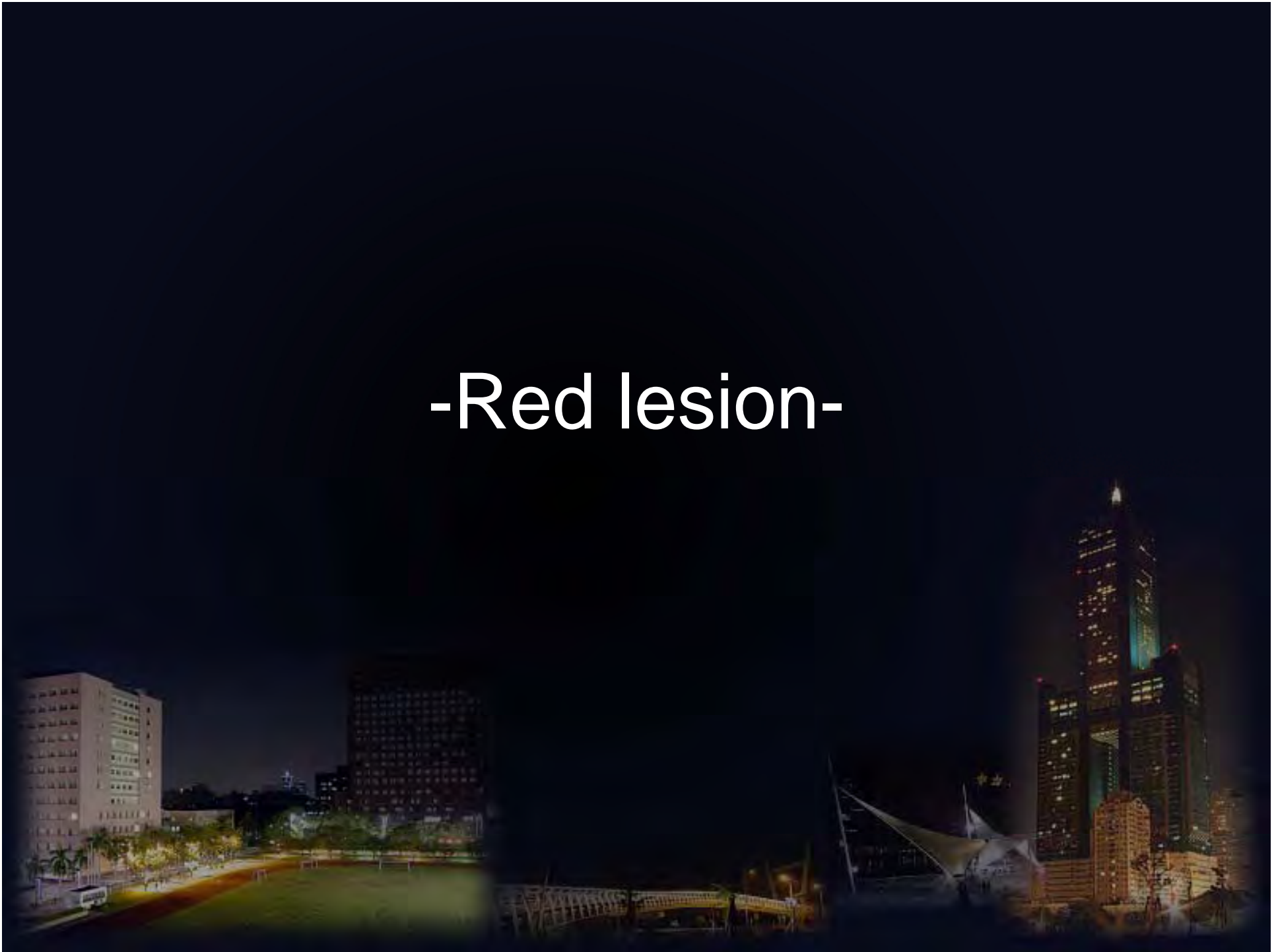
White lesion-

1. Leukoplakia

2. Submucous fibrosis



-Red lesion-



Erythroplakia



Erythroplakia

- Etiology and pathogenesis :
 1. Disappearance of keratin layer and hypervascularization of CT
 2. ABC factor 、 X-ray exposure 、 immune depression
 3. Erythroplakia → Carcinoma in situ 、 Exophytic, red SCC 、 Macular red SCC



Erythroplakia

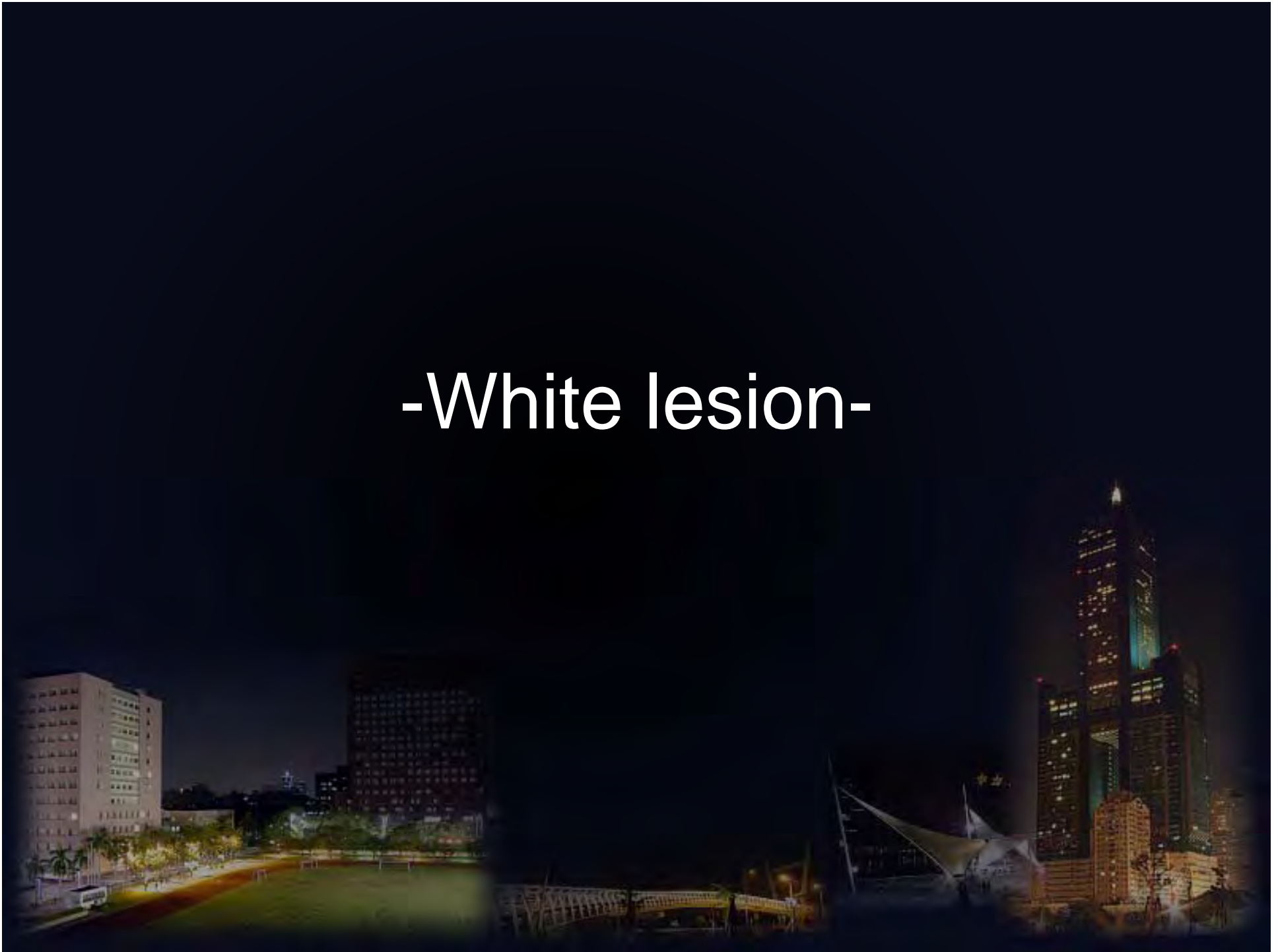
- **Clinical features :**
 1. Well-demarcated, erythematous macule with soft texture
 2. Floor of mouth, tongue, soft palate.



	Our case	Erythroplakia
Gender	Male	no
Age	47	50~70
Site	Floor of the tongue	男生口底 女生下顎gingival-alveolar mucosa
Size	2*2cm	Variable
Surface	Rough	Soft
Base	Sessile	Slight raised
Shape	Dome	Variable
Color	Red	Red patch
Consistency	Soft	
Fluctuation	-	
Mobility	Fixed	
Pain	-	
Tenderness	-	
Induration	+	
LAP	-	



-White lesion-



Leukoplakia



Leukoplakia

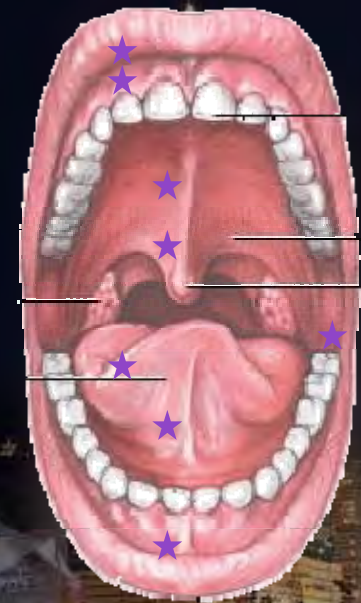
- Etiology and pathogenesis :
 1. white patch or plaque can not be characterized as any other disease
 2. Thickening of keratin layer and spinous layer
 3. ABC factors 、 UV 、 microorganism(syphilis 、 Candida 、 HPV16 、 18) 、 trauma
 4. precancer






Leukoplakia

- Clinical features :

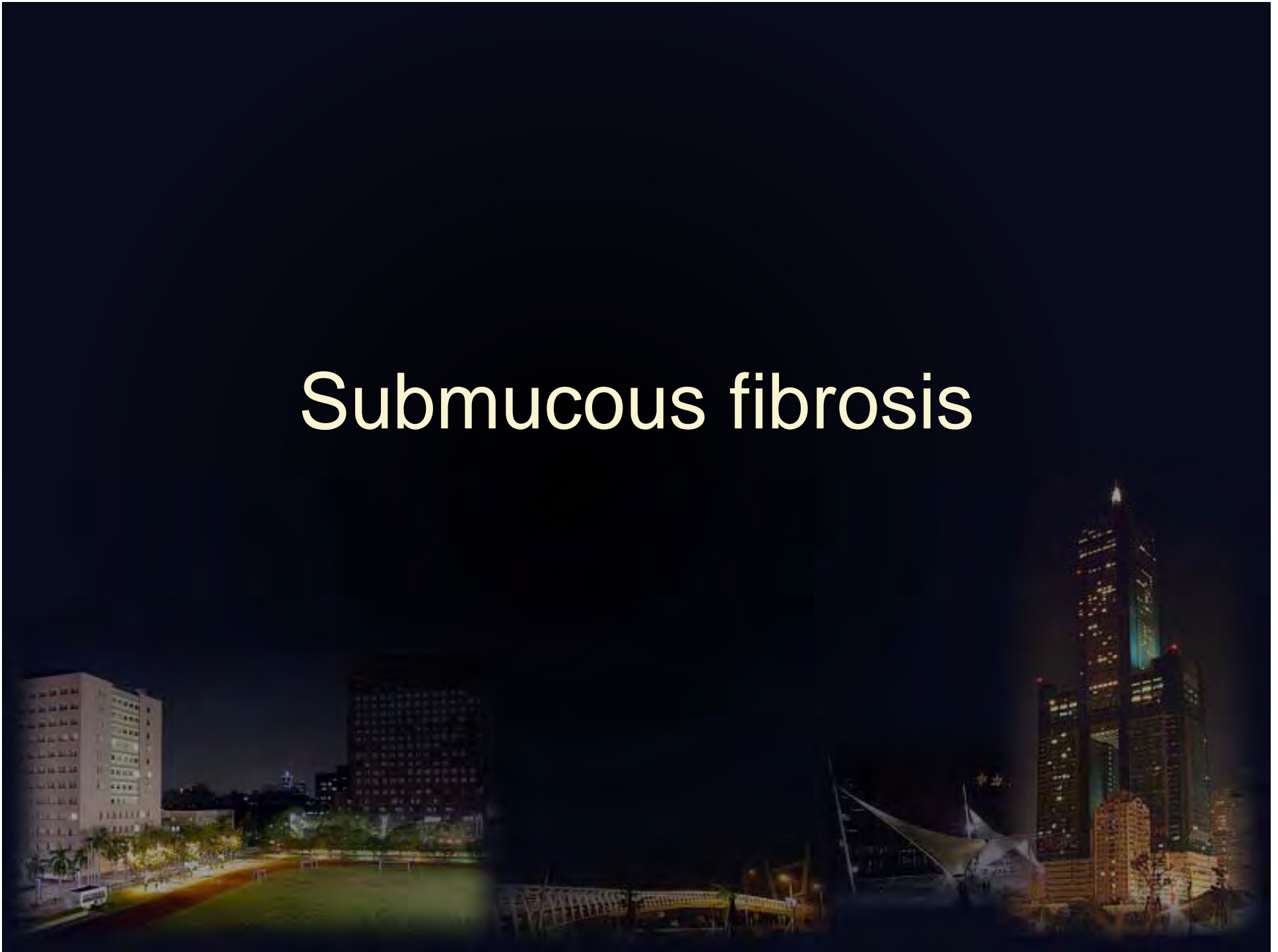
1. Unhealing lesion lasts over 2 weeks
2. Prevalence increase with age
3. Slightly elevated, and well-demarcated border
4. rapid growth
5. maybe bone or nerve destruction



	Our case	Leukoplakia
Gender 	Male	Male 70%
Age 	47	40~70yr
Site 	Tongue floor	lip vermilion, buccal mucosa, mandibular gingiva, tongue, oral floor, hard palate, maxilla gingiva, lip mucosa, soft palate
Size	2*2cm	Variable
Surface	Rough	Variable
Base	Sessile	Unknown
Shape	Dome	Variable
Color	Red	White
Consistency	Soft	
Fluctuation	-	
Mobility	Fixed	
Pain	-	
Tenderness	-	
Induration	+	
Lymphadenopathy	-	

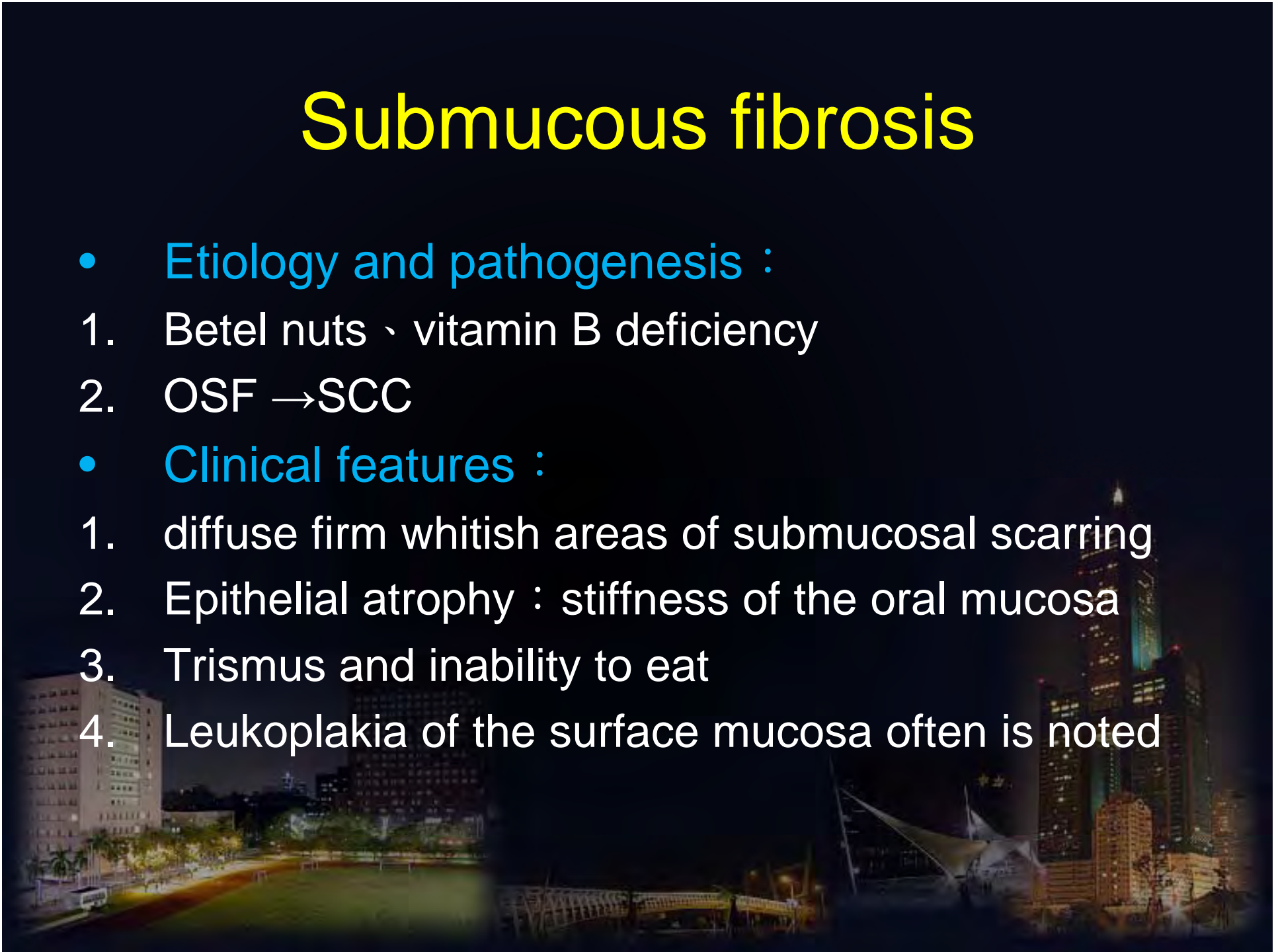


Submucous fibrosis



Submucous fibrosis

- Etiology and pathogenesis :
 1. Betel nuts 、 vitamin B deficiency
 2. OSF → SCC
- Clinical features :
 1. diffuse firm whitish areas of submucosal scarring
 2. Epithelial atrophy : stiffness of the oral mucosa
 3. Trismus and inability to eat
 4. Leukoplakia of the surface mucosa often is noted



	Our case	Submucous Fibrosis
Gender	Male	Female
Age	47	Any age
Site	Tongue floor	Buccal mucosa, retromolar area, soft palate
Size	2*2cm	Variable



	Our case	Submucous Fibrosis
Surface	Rough	
Base	Sessile	
Shape	Dome	Marble like
Color	Red	White
Consistency	Soft	Hard



	Our case	Submucous Fibrosis
Pain	—	Burning, pain when irritating by food
Tenderness	—	
Induration	+	-
LAP	—	



	Our case	Submucous fibrosis
Gender	Male	Female
Age	47	Any age
Site	Floor of the tongue	Buccal mucosa, retromolar area, soft palate
Size	2*2cm	Variable
Surface	Rough	
Base	Sessile	
Shape	Dome	Marble like
Color	Red	White
Consistency	Soft	Hard
Fluctuation	-	
Mobility	-	-
Pain	-	Burning , pain when irritating by food
Tenderness	-	
Induration	+	-
Lymphadenopathy	-	



Adenoid cystic carcinoma



Melanoma

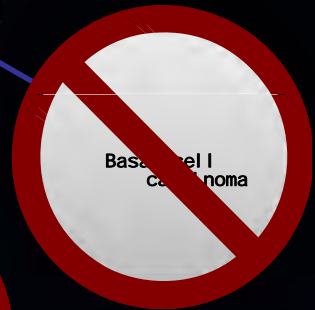


Squamous cell carcinoma

Red Lesion



Erythroplakia



Basaloid carcinoma



Undifferentiated carcinoma



Leukoplakia

White Lesion



Submucous fibrosis



Clinical Impression

-Red lesion-

- Peripheral malignant tumor
 - **Squamous Cell Carcinoma, right mouth floor**
- Precancerous condition
 - **Erythroplakia, right mouth floor**



Clinical Impression

-White lesion-

- Precancerous condition

-Leukoplakia



Reference

- *Oral & Maxillofacial Pathology*

~ the fifth edition by Paul W. Goaz, B.S., D.D.S., S.M. Orion H. Stuteville, D.D.S., M.D.S., M.D.

- *Differential Diagnosis of Oral and Maxillofacial lesions*

~ the second edition by Charles A. Waldron, William G. Shafer, and Robert J. Gorlin



Thank you for your attention !

