

## A case presentation of Hyperplastic gingivitis in Acute leukemia

**Olesea Musteata**

State University of Medicine and Pharmacy, Republic of Moldova

The median incidence of acute leukemia in the Republic of Moldova constitutes 2.4 cases per 100 000 population. Gingival hyperplasia is secondary to the infiltration of gingival tissue with leukemia cells and reported to be the most consistent symptom that directs the patient to require early dental consultation, leading thereafter to a diagnosis of leukemia. A 34-year-old woman had been admitted to the Division of Hematology of the Institute of Oncology on 16 January 2012 with a one-month history of fatigue, anorexia, headache and gingival enlargement initially detected by a family doctor from the Consulting Center of the regional municipal hospital. Clinical examination showed marked anemic syndrome, moderate splenomegaly (palpable at the level of costal arch) and slight hepatomegaly. ECOG-WHO performance status rate was 2. Intra-oral examination revealed the generalized gingival hyperplasia. There was a fair amount of plaque and calculus, but did not justify the degree of enlargement. On palpation, the gingiva was found to be spongy and painless, with solitary sectors of necrosis. Blood count: Hb 66 g/l, erythrocytes  $2.3 \times 10^{12}/l$ , leukocytes  $35.2 \times 10^9/l$ , platelets  $115.0 \times 10^9/l$ , ESR 50 mm/h, blast cells 42%, myelocytes 13%, metamyelocytes 3%, segments 18%, monocytes 13%, lymphocytes 11%. Bone marrow aspiration detected hypercellularity, red cell line hypoplasia, and elevated rates of myeloid blast cells (48.0%) and monocytes (9.0%). Both the bone marrow and the gingival morphology, thus, demonstrated leukemia cell infiltration, confirming the diagnosis of acute myelo-monoblastic leukemia. The induction therapy with cytarabine and doxorubicin resulted in a partial resolution of the gingival hyperplasia. Stomatologists should be aware of the various periodontal manifestations and complications of acute leukemias to enable early diagnosis and timely referral for the proper management.

### Biography

Olesea Musteata had completed her MD at the age of 25 years after graduating the State University of Medicine and Pharmacy "N. Testemitanu" from the Republic of Moldova. Currently she accomplishes the postdoctoral studies at the same university. She is an assistant professor at the university department of Therapeutic Stomatology. This year she has served as a member of the university commission for the state exam on stomatology. She has published 10 articles and abstracts in reputed journals/abstract books.

obrenici@mail.ru