

JOINT EVENT

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Calcifying cystic odontogenic tumor a rare entity

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An 18-year boy reported with a painless swelling on the left side of his lower face for three months. On clinical examination, facial deformity was observed with a swelling of 4cm x 2cm which extended from #32 to #34. The swelling was non-tender, firm and non-fluctuant with no difficulty in mouth opening. #38 and #33 were missing, #73 was retained but displaced. Aspiration revealed straw colored fluid. Enucleation, along with extraction of #33 and #73 followed by curettage was done. Histopathology determined it as calcifying cystic odontogenic tumor. Patient was followed up on 7th day, 4th week, 6th month and 1 year, which revealed adequate healing and no signs of reoccurrence noted. Endodontic treatment of #36 was done. CCOT (calcifying cystic odontogenic tumor) is a rare developmental odontogenic cyst thought to arise from the odontogenic epithelial remnants within the jaw bones or gingival tissue. It may be infiltrative or malignant intraosseous or extra-osseous. An equal distribution in the jaws is seen mostly in the anterior area with a strong predilection for second decade of age. No gender dominance is seen. It presents as a painless slow growing mass unless secondarily infected. When located in the maxilla, it is associated with headaches, epistaxis and nasal congestion. Radiographic evaluation is facilitated with occlusal, OPG and CT scan. Associated dentition may show root resorption, divergence and impactions. The lesion can be well defined uni-locular or multi-locular. The capsule is fibrous having 4 to 10 cells in thickness. Basal cells are cuboidal or columnar with an overlying loosely arranged epithelium mimicking the stellate reticulum in ameloblastic lesions. Enucleation and curettage is recommended for the cystic variant as tumor debris can lead to reoccurrence. Excision is well-thought-out as treatment of choice for solid variants. The reported prognosis is excellent with less chances of recurrence. All this was seen with the present case.

Recent Publications

1. Asrar Ahmed et al. (2017) Morphological changes in dental pulp with different depth of tooth preparation. Journal of University College of Medicine and Dentistry. 8(3):24-33.
2. Asrar Ahmed et al. (2016) Frequency of type traits of mandibular second premolars: a study. Pakistan Oral and Dental Journal. 36(3):430-432.
3. Khalid Mahmood Siddiqi (2016) Pattern of medical conditions among patients attending oral and maxillofacial surgery over a period of one year. Journal of Islamabad Medical and Dental College. 5(1):26-29.
4. Muhammad Israr, Muhammad Zeeshan Baig, Waheed Ullah Khan (2014) Impacted third molar extractions: are we following any recommended guidelines? Pakistan Oral & Dental Journal. 34(3):426-28.

Biography

Muhammad Zeeshan Baig is an Oral Surgeon and an Assistant Professor Oral and Maxillofacial Surgery Department Islamabad Medical and Dental College Islamabad, Pakistan.

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