20190227

SUBMANDIBULAR GLAND EXCISION AS A FINAL APPROACH TO SIALOADENITIS: A CASE SERIES *ISABELLA ROMÃO CANDIDO, ADRIANO LIMA GARCIA, BRUNO REINOSO NORONHA OLSEN, RUBENS CALIENTO, THIAGO IAFELICE DOS SANTOS, ANDRÉ LUÍS FERNANDES DA SILVA, and, ALEXANDRE MEIRELES BORBA*

Recurrent submandibular sialadenitis unresolved after more conservative approaches may have no other option than submandibular gland excision. Three cases of repetitive sialadenitis illustrate a history of swelling of the submandibular region as well as the floor of the mouth and tomographic findings of submandibular gland increase and presence of calculi. In spite of more conservative attempts, recurrence of sialadenitis determined the need for a more aggressive approach, which was accomplished by submandibular gland excision under general anesthesia. Histologic analysis confirmed the diagnosis of sialadenitis secondary to sialolithiasis. Postoperative control of all patients displayed normal sensibility, adequate tongue movement, and preserved facial expression. This case series represents submandibular gland final stage treatment to illustrate that, in spite of conservative attempts, surgical submandibular gland excision might be the only alternative in a recurrent sialadenitis case.

20190240

MALIGNANT PERIPHERAL NERVE SHEATH TUMOR AFFECTING THE MANDIBLE: A CASE REPORT AND IMMUNOHISTOCHEMICAL ANALYSIS *TÚLIO MORANDIN FERRISSE, ANALÚ BARROS DE OLIVEIRA, HEITOR ALBERGONI SILVEIRA, LUCIANA YAMAMOTO ALMEIDA, ALEXANDRE ELIAS TRIVELLATO, CÁSSIO EDVART SVERZUT, and, JORGE ESQUICHE LEÓN*

Malignant peripheral nerve sheath tumor (MPNST) is a rare sarcoma, originating from peripheral nerves or cells associated with nerve sheath. Consequently, MPNST can originate from several neural cell types, with its histomorphology varying from case to case. These tumors are mainly located in the extremities and paraspinal region. A 61-year-old female patient was referred after presenting with a tumor mass on the right mandibular body, diagnosed previously as odontogenic fibromyxoma. A new biopsy was performed, which revealed large areas of predominantly myxoid, spindle cell neoplasm of low-grade, focally forming perivascular cell aggregates and heterologous elements. Immunohistochemical analysis showed positivity for vimentin, CD34, CD56, CD57, and focally for S100 and alpha-SMA. Ki-67 was $<5\%$. This case illustrates that MPNST should be included in the differential diagnosis of osteolytic lesions affecting the jaws, being a detailed anatomopathologic and immunohistochemical analysis essential to establish the correct diagnosis, especially in low-grade MPNST cases.

20190244

EXTRAMEDULLARY B-CELL ACUTE LYMPHOBLASTIC LEUKEMIA/LYMPHOMA MANDIBLE INFILTRATION IN A VENEZUELAN CHILD REFUGEE *PAOLA ARISTIZÁBAL ARBOLEDA, SERGIO TAKASHI KUSSABA, REGINA MARIA HOLANDA DE MENDONÇA, IZILDA APARECIDA CARDINALLI, MARCIO AJUDARTE LOPES, OSLEI PAES DE ALMEIDA, and, ALAN ROGER SANTOS-SILVA*

A 10-year-old female was referred for investigation of a 4-month history of a swelling in the anterior mandible producing facial asymmetry, accompanied by joint pain, vomiting, and weight loss. Intra-oral examination revealed nonpainful submucosal swelling with telangiectasia areas on the overlying mucosa and teeth mobility. Panoramic radiograph showed a poorly defined radiolucent image in a "floating teeth pattern." Computed tomography revealed buccal and lingual cortical bone destruction without root resorption. Incisional biopsy was performed and histopathologic analysis revealed a diffuse proliferation of "small round blue cells" displaying angiocentricity. The tumor cells showed positivity for LCA, CD79 a, CD99, TdT, FLI-1, and Ki-67(90%). The patient was referred to an oncology center with a suggestive diagnosis of B-cell lymphoblastic lymphoma. Bone marrow aspiration demonstrated 50% of lymphoblast infiltration, leading to the final diagnosis of extramedullary B-cell acute lymphoblastic leukemia/lymphoma infiltrating the mandible. The patient is undergoing oncology treatment, and disease is currently controlled.

20190302

METASTATIC ORAL MELANOMA: A CASE REPORT *ANA RAPHAELA MAIA DEZAN COUTO CURVO, LEANDRO DORIGAN DE MACEDO, HILTON MARCOS ALVES RICZ, ALFREDO RIBEIRO DA SILVA, CRISTINA BUENO BRANDAO, CRISTIANE APARECIDA NOGUEIRA BATAGLION, and, LARA MARIA ALENCAR RAMOS INNOCENTINI*

Oral melanoma represents an unusual type of malignant tumor that is extremely aggressive, with poor prognosis that usually develops distant metastases, local recurrence, and low overall survival in 5 years. A 66-year-old female patient, ex-smoker, complained of palate lesion after a dental procedure 1 year ago, weight loss of 10 kg in 6 months, and cervical lymphadenopathy. The oroscopy evidenced a bleeding blackened lesion of approximately 10 cm located on the palate, affecting left gingival border and ipsilateral lymphadenopathy. Incisional biopsy was performed with a positive result for invasive melanoma and positive immunohistochemical profile for HMB-45, Melan-A, and S-100. Thorax tomography presented suspect image of secondary involvement, and clinical staging was defined as T4 BN1 M1, grade IVb. Surgical treatment was contraindicated due to metastatic lesions. Oncologists are waiting the result of c-Kit for therapeutic definition.

20190352

ATYPICAL ORAL MANIFESTATION OF VISCERAL LEISHMANIASIS IN HUMAN IMMUNODEFICIENCY VIRUS–INFECTED CHILD *REYNA AGUILAR QUISPE, BRENA RODRIGUES MANZANO, ALOIZIO PREMOLI MACIEL, CÁSSIA MARIA FISCHER RUBIRA, DENISE TOSTES OLIVEIRA, EDNA YAYOI SAEKI, and, PAULO SÉRGIO DA SILVA SANTOS*

A 7-year-old white boy presented with weight loss, coughing, hepatosplenomegaly, and pancytopenia with 2 months of