origin. We present a case of an adenomatoid hyperplasia of minor salivary glands on the palate. A 42-year-old female patient was referred after presenting with a painless swelling of approximately 1.5 cm diameter in the left side of the hard palate. An excisional biopsy was performed. Microscopically, the specimen presented several lobules of minor salivary gland, all almost constituted by mucinous acini. At the periphery, hyperkeratotic stratified squamous epithelium lining, with mild chronic inflammation in the underlying connective tissue, was observed. The patient continues to be observed, and there has been no evidence of recurrence after 6 months' of follow up. The adenomatoid hyperplasia pathogenesis remains unknown; however, clinicians should be aware of this condition, which may mimic a salivary gland neoplasm.

20190045

FUSOCELLULAR NEOPLASM OF THE JAW: A CHALLENGE FOR DIAGNOSIS AND TREATMENT *LAURINDO MOACIR SASSI, JOSE LUIS DISSENHA, MARIA ISABELA GUEBUR, FERNANDO L. ZANFERRARI, JULINANA L. SCHUSSEL, ROBERTA T. STRAMANDINOLI-ZANICOTTI, and, MARCIO VINICIUS HURCZULACK QUADROS*

A female, 21 years old, type-I diabetic, presented with right pre-auricular pain and limited jaw function. Discrete facial asymmetry and swelling were noted. Panoramic radiograph showed a mixed, expansive, multilocular lesion in the right mandibular ramus about 6 cm wide and undefined margins. After incisional bone biopsy, anatomopathologic study revealed a fusocellular neoplasm with osteoid deposition. Immunohistochemistry showed a Ki-67 proliferative index of about 20% with positive ALFA acute myeloid leukemia, vimentin, and CD-34 markers. S-100 and desmin markers were negative. Hypothesis for the diagnosis was ossifying fibroma or low-grade osteosarcoma. After biopsy, the patient had increased pain and swelling. Aggressive treatment through surgical resection and immediate reconstruction with a microvascular free fibula flap was indicated. Final diagnosis after resection was ossifying fibroma. The patient remains disease-free after 6 months. Fibro-osseous lesion diagnoses are often challenging, and aggressive treatment may be indicated when low-grade malignant disease is suspected.

20190048

PYOGENIC GRANULOMA IN THE FLOOR OF THE MOUTH *PATRÍCIA LOPES ALCANTARA, ÁNGEL TERRERO PÉREZ, RAQUEL D'AQUINO GARCIA CAMINHA, EDUARDO SANT'ANA, ALBERTO CONSOLARO, ANA LUCIA ALVARES CAPELOZZA, and, PAULO SÉRGIO DA SILVA SANTOS*

Pyogenic granuloma is defined as a non-neoplastic proliferative process, probably due to local irritation or trauma, with the gingiva being the site most affected (75% to 85%). A 64-year-old woman was examined, and the presence of increase in volume in the floor of the mouth on the left side, with a 2-month evolution, extending from the edentulous region of the teeth 34 to 37, painful at palpation, associated ulcer with raised borders and yellowish pseudomembrane was observed. An occlusal radiograph of the mandible was performed, and salivary calculus was not present. The clinical characteristics led to the presumptive diagnosis of squamous cell carcinoma or lymphoma, so an incisional biopsy was performed. In the histopathologic examination submucosa with numerous neoformed vessels with intense neutrophils infiltration was observed, and the final diagnosis was pyogenic granuloma. The treatment was total surgical excision of the lesion, and the patient was followed up with no recidivism.

20190053

METHOTREXATE-INDUCED MUCOSITIS AFFECTING THE SOFT PALATE: A CASE REPORT *EVÂNIO VILELA DA SILVA, TÚLIO MORANDIN FERRISSE, ANDREIA BUFALINO, LUCIANA YAMAMOTO DE ALMEIDA, HEITOR ALBERGONI DA SILVEIRA, XIOMARA BEATRIZ JIMENEZ POLANCO, and, JORGE ESQUICHE LEÓN*

Methotrexate (MTX) is an antimetabolic drug used for treating rheumatoid arthritis (RA), psoriasis, and Crohn's disease, including also lymphoproliferative diseases, among others. At low doses, MTX is beneficial in the management of patients with RA and psoriasis. Here, we report a case of MTX-induced oropharyngeal mucositis. A 75-year-old woman presented in our service complaining of a mouth sore 6 days ago. Her medical history revealed hypothyroidism and RA, the latter in treatment with MTX, 7.5 mg/week. Intra-oral examination revealed an ulceration covered by a fibrinopurulent membrane and erythematous borders, measuring 2 cm in diameter and located in the right side of the soft palate. An incisional biopsy evidenced a nonspecific superficial ulceration. After excluding other possible causes, the final diagnosis was MTX-induced oropharyngeal mucositis, which should be considered in the differential diagnosis of oropharyngeal ulcerative lesions.

20190056

HIGH-POWER LASER TREATMENT FOR PERIPHERAL OSSIFYING FIBROMA IN A NEWBORN *NATÁLIA SANTOS BARCELOS, THALITA SOARES TAVARES, ADRIANA APARECIDA SILVA DA COSTA, FERNANDA BARTOLOMEO FREIRE-MAIA, LEANDRO NAPIER DE SOUZA, RICARDO ALVES MESQUITA, and, PATRÍCIA CARLOS CALDEIRA*

A 2-month-old girl presented with her parents with a nodular lesion on the anterior lower alveolar ridge, which has lasted for 45 days. The girl had a natal tooth (71), which was removed when she was 15 days old. Moreover, they reported current impairment in sucking, swallowing, and breathing. Physical examination revealed a nodular, firm, and pediculate lesion, measuring 10 × 5 mm, covered by a pink, flat, and smooth mucosa. Radiograph showed the absence of tooth 71 and tooth 81 erupting under the lesion. An excisional biopsy was performed under local anesthesia using a diode laser. Microscopic examination revealed a lesion covered by squamous epithelium, presenting a proliferation of round-shaped mesenchymal cells in the lamina propria, associated with deposits of mineralized material. The final diagnosis was peripheral ossifying fibroma, and the patient is free of recurrence after 9 months. Support: CAPES.

20190059

LARGE DENTIGEROUS CYST ASSOCIATED WITH IMPACTED TEETH IN A GERIATRIC PATIENT *EDITH UMASI RAMOS, JUAN NICOLAS HUAYLLAPUMA LIMA, TAINARA TEJADA CAMACHO, and, ANA PAULA FARNEZI BASSI*

A dentigerous cyst is an odontogenic cyst that develops in a lower third molar, typically found in individuals up to the third decade of life. The purpose of this work is to report on a clinical case of a dentigerous cyst of a lower third molar found in a 61-year-old patient who lacked lower posterior teeth on both sides, with an extensive lesion at the level of the body and angle of the jaw. Radiologic examination revealed the presence of a retained third molar, after which enucleation was performed under general anesthesia. Histopathologic analysis confirmed the diagnosis of the dentigerous cyst, observing the favorable resolution of the patient. We can conclude that the presence of retained third molars can cause very slow-growing, painless lesions that can lead to severe bone destruction during a person's lifetime, resulting in injuries such as dentigerous cysts.

20190061

IMPORTANCE OF CORRECT DIAGNOSIS AND TREATMENT OF EXTRA-ORAL FISTULA OF ODONTOGENIC ORIGIN

EDITH UMASI RAMOS, JUAN NICOLAS HUAYLLAPUMA LIMA, TAINARA TEJADA CAMACHO, and, ANA PAULA FARNEZI BASSI

When properly diagnosed, a cutaneous fistula of dental origin has a favorable therapeutic prognosis. An erroneous diagnosis, however, can lead to inappropriate treatment; also, orocutaneous fistulas occur in about 1% of patients with odontogenic lesions. The objective of this work is to describe the clinical case of a 21-year-old patient with a fistula near the mentalis muscle, who was mistakenly treated for a dermatologic lesion for 8 years. When referred to the stomatology service, an initial radiologic examination found no apparent dental cause. Surgical treatment was then performed under general anesthesia, followed by anatomopathologic examination, with a final diagnosis of apical granuloma, requiring dental removal to eliminate the infection and the fistula. We can conclude that whenever a facial skin lesion is observed, a dental cause must be sought to avoid prescribing the wrong treatment.

20190065

PRIMARY ORAL MELANOMA: A CASE REPORT WITH IMMUNOHISTOCHEMICAL FINDINGS

BRUNO TEIXEIRA GONÇALVES RODRIGUES, BRUNO AUGUSTO BENEVENUTO DE ANDRADE, MÁRIO JOSÉ ROMAÑACH, THAÍS PIMENTEL SÁ BAHIA, NATHÁLIA DE ALMEIDA FREIRE, and, MÔNICA SIMÕES ISRAEL

Melanoma is a potentially aggressive and rare malign neoplasm of melanocytic origin. Only 1% occur in oral mucosa, and it is more aggressive compared with the cutaneous counterpart. The tumor occurs more frequently in the hard palate and gingiva. The aim of this study is to report a case of primary oral melanoma in a 70-year-old female patient. Multiple asymptomatic pigmented lesions were observed in the upper vestibular gingiva and hard palate. An incisional biopsy was performed. Microscopic findings revealed proliferation of pleomorphic epithelioid and plasmacytoid cells positive by immunohistochemistry for S-100 protein, HMB-45, Melan-A, and Ki-67 (80%) confirming the diagnostic of oral melanoma. The patient was forwarded to a head and neck surgeon service for treatment. This study showed the importance of histopathologic and immunohistochemical evaluation to determine the morphologic aspects of oral melanoma to establish the final diagnosis.

20190068

CLINICAL-PATHOLOGIC ANALYSIS OF A SERIES OF CASES OF JUVENILE OSSIFYING FIBROMA

CRISTIANNE KALINNE SANTOS MEDEIROS, EVERTON FREITAS DE MORAES, GLÓRIA MARIA DE FRANÇA, JOAQUIM FELIPE JÚNIOR, KATIANNE SOARES RODRIGUES, ROSEANA DE ALMEIDA FREITAS, and, HÉBEL CAVALCANTI GALVÃO

Juvenile ossifying fibroma (JOF) is an uncommon benign fibro-osseous lesion that affects young individuals and presents an aggressive clinical behavior and high rates of recurrence. This paper aims to report 7 cases diagnosed as JOF in a reference center, correlating them with clinical-pathologic aspects in the literature. We found 7 cases diagnosed as JOF with the age of patients ranging from 11 to 39 years. The mandible was the most common location, and in 3 cases pain symptoms were reported. Regarding the histopathologic findings, the majority of cases had a well-cellular pattern, and the trabecular subtype was the most commonly found. It was observed that in 3 cases that had relapsed, 2 had conservative treatment. In view of this, it is important to know the clinical-pathologic aspects of this lesion to perform a correct diagnosis and appropriate treatment to reduce the high recurrence rate of this lesion.

20190069

CUTANEOUS AND HEMORRHAGIC BLEEDING INJURIES OF THE IDIOPATHIC THROMBOCYTOPENIC PURPURA

JOÃO PEDRO GRANDINI ZEFERINO, CAROLINA JUNQUEIRA DA COSTA NETTO, GABRIELLE CALVI VELOSO, VICTOR MONTALLI, DANIELA PRATA TACCHELLI, CAROLINA ALVES DOS REIS GATI, and, PAULO MORAES

The idiopathic thrombocytopenic purpura (ITP) is an autoimmune disease of unknown cause being attributed by some authors as an immune response to some types of vaccine as a trigger of the disease. It is estimated that 10 in every 100,000 middle-aged individuals develop the disease. The first treatment choice is corticosteroids, and the diagnosis is performed with clinical evidence of bleeding, bruises, epistaxis, petechiae, and hematologic tests that confirm intense thrombocytopenia. This case report is about a melanoderma patient, 34 years old, who had a sudden appearance of bruising on various areas of the body and presence of petechiae and hemorrhagic blisters in the oral cavity. Hematologic examinations showed intense thrombocytopenia (30,000 platelets); the patient was treated with a corticosteroid and bevacizumab without adequate response and because it was a refractory disease, the patient underwent chemotherapy with vincristine leading to remission of the disease.

20190072

UNUSUAL MORPHOLOGIC PRESENTATION OF AN AMELOBLASTIC FIBROMA IN A YOUNG PATIENT

WALESKA OHANA DE SOUZA-MELO, PEDRO JOSÉ TARGINO RIBEIRO, ERNANI CANUTO FIGUEIRÊDO JÚNIOR, IGOR FIGUEIREDO PEREIRA, TIAGO JOÃO DA SILVA FILHO, DALIANA QUEIROGA DE CASTRO GOMES, and, JOZINETE VIEIRA PEREIRA