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reported being hypertensive and diabetic, both controlled. In extra-oral physical examination, a nodular, rounded mass was observed in the region of the left zygomatic bone, resilient to palpation, 4 cm in diameter. In the excisional biopsy a total removal of the lesion was performed. During surgery, a whitish pasty content was appreciable. Microscopic sections revealed a virtual cystic cavity covered by orthokeratinized, stratified pavement epithelium with well-marked granular layer, filled with keratin blades. Underlying delicate fibrous capsule was noted. The diagnosis based on the clinical and microscopic characteristics was a dermoid cyst. Fifteen days after surgery the stitches were removed. After 1 month, there was no recurrence of the lesion, he had excellent healing, and he was discharged.

20190038

MULTIPLE MYELOMA MIMIKING ADVANCED PERIODONTAL DISEASE

ROGERIO GONDAK, EMANUELY SILVA, PABLO LEITE, and, LEE I.-CHING

Multiple myeloma (MM) is a malignant hematologic disease characterized by the multicentric proliferation of plasma cells in the bone marrow. A 58-year-old male patient was referred with complaint of swelling on the anterior mandible associated with bleeding, dental mobility, and difficulty in using partial inferior prosthesis. The initial clinical diagnosis was advanced periodontal disease. The radiographic examination revealed extensive osseous bone resorption and fluctuation of anterior teeth. After biopsy, the microscopic examination revealed malignant neoplasia composed by monotonous plasmacytoid cells with a variable degree of maturation. The neoplastic cells presented intense pleomorphism, prominent nucleolus, and hyaline inclusions. The immunohistochemical analyses showed positivity of the neoplastic cells for CD45, CD138, Kappa, and Ki-67 (5% to 10%). There was negativity for cytokeratin (CK-pool), CD20, and lambda. The final diagnosis of MM was given. The patient has been undergoing chemotherapy and followed-up by the multidisciplinary team.

20190039

CRANIOFACIAL FIBROUS DYSPLASIA: A CASE REPORT NATÁLIA CRISTINA TRENTIN BORDIGNON, LUIZ HENRIQUE GODOI MAROLA, and, ROGÉRIO DE OLIVEIRA GONDAK

Craniofacial fibrous dysplasia (CFD) is a benign bone development anomaly characterized by involvement of the skull and facial bones. This disease can affect 1 bone or multiple bones resulting in deformity, fractures, and pain. An 18year-old male with facial asymmetry presented with an extensive and not well-demarcated lesion involving the left craniofacial side. Tomographic examination showed an expansive bone lesion with loss of corticomedullary differentiation affecting the left maxilla, maxillary sinus, ethmoid, sphenoid infundibulum, and nasal and frontal bones. After biopsy, the microscopic examination revealed irregular trabeculae of the lamellar bone immersed in a moderately cellularized and vascularized dense connective tissue. Curvilinear bone trabeculae arranged in a pattern of Chinese letter form was noted. The diagnosis of CFD was made. The treatment has consisted of multiple surgeries to restore the facial contour and asymmetry. The patient remains in follow-up.

20190040

EXTENSIVE NASOPALATINE DUCT CYST: A

CASE REPORT NATÁLIA CRISTINA TRENTIN BORDIGNON, LUIZ HENRIQUE GODOI MAROLA, SARAH FREYGANG MENDES PILATI, HEITOR FONTES DA SILVA, and, ROGÉRIO DE OLIVEIRA GONDAK

Nasopalatine duct cyst (NDC) is a development originating from epithelial remnants of the nasopalatine duct. NDC has a slow growth and is usually asymptomatic. The aim of this study is to describe a case of NDC in a 26-year-old male who presented with swelling in the anterior palate measuring approximately 2.5 cm on its longest diameter. Tomographic examination showed a unilocular, well-defined radiolucency with sclerotic border located between the maxillary central incisors roots. The microscopic examination revealed fragments of cystic capsule lined by a thin stratified squamous epithelium in combination with simple columnar and pseudostratified ciliated columnar epithelium. The diagnosis of NDC was made. The lesion was surgically removed by enucleation. The patient remains under follow-up.

20190041

IUVENILE TRABECULAR OSSIFYING

FIBROMA: A CASE REPORT LETÍCIA MARTINS GUIMARÃES, ROBERTA RAYRA MARTINS CHAVES, CAROLINA CAVALIERI GOMES, WAGNER HENRIQUES DE CASTRO, and, RICARDO SANTIAGO GOMEZ

Juvenile ossifying fibromas are aggressive benign fibro-osseous neoplasms that present 2 distinctive histologic variants, trabecular and psammomatoid. The trabecular variant occurs most commonly in the maxilla and affects younger patients, children and adolescents, with a mean age of 8.5 to 12 years. A 9-yearold girl presented with an asymptomatic swelling in the left maxilla. Computed tomography showed a well-circumscribed, expansive, unilocular, mixed hypodense/hyperdense lesion in the left maxilla and nasal cavity. The incisional biopsy confirmed the diagnosis of juvenile trabecular ossifying fibroma. After surgical excision with peripheral ostectomy under general anesthesia, prosthetic rehabilitation with removable partial dental prosthesis was performed. One year and 3 months later, computed tomography images were suggestive of recurrence. The recurrent lesion was treated by surgical excision with peripheral ostectomy followed by another prosthetic rehabilitation. At the moment, no sign of recurrence was noted in 5 years' of followup after the second surgery.

20190042

ADENOMATOID HYPERPLASIA OF THE PALATE: AN UNCOMMON LESION OFTEN MIMICKING SALIVARY GLAND TUMOR

DARCY FERNANDES, HEITOR ALBERGONI DA SILVEIRA, ANDREIA BUFALINO, LUCIANA YAMAMOTO DE ALMEIDA, MATHEUS HENRIQUE LOPES DOMINGUETE, KAMILA PRADO PEREIRA GRACIANO DOMINGUETE, and, JORGE ESQUICHE LEON

Adenomatoid hyperplasia of the minor salivary glands is an uncommon benign proliferation of mucous glandular tissue. This lesion may clinically resemble a neoplasm of salivary gland