20190779

MCCUNE-ALBRIGHT SYNDROME ASSOCIATED WITH ACROMEGALY: A CASE OF FACIAL DISFIGURATION *CRISTIANE MELO DA SILVA SANTOS, VICTOR ADRIANO DE OLIVEIRA MARTINS, FLÁVIO WELLINGTON DA SILVA FERRAZ, GUSTAVO GROTHE MACHADO, and, ANDRÉ CAROLI ROCHA*

McCune-Albright syndrome is characterized by the triad of fibrous dysplasia, café-au-lait spots, and hyperfunctioning endocrinopathies. About 20% of the patients affected by the syndrome have acromegaly. A 36-year-old male patient with McCune-Albright syndrome and acromegaly described a complaint of severe headache and body pain when he was diagnosed with a syndrome by an endocrinologist. He was referred to treatment by maxillofacial surgery with craniofacial involvement associated with fibrous dysplasia, amaurosis in the right eye due to pathologic occlusion of the optic canal, severe facial disfiguration, dental diastemas, and alveolar borders of altered contours. Image exams revealed polyostotic fibrous dysplasia and pituitary adenoma. The patient underwent osteoplasties on the face with the aid of virtual planning. After the surgeries, he had significant improvement of the masticatory function and aesthetics with a balance of the proportions of a third of the face and a better social life.

20190784

CESTODE INFECTION IN THE PAROTID LYMPH NODE *TÁCIO CANDEIA LYRA, ELMA MARIANA VERÇOSA DE MELO SILVA, DANILO DE MORAES CASTANHA, LUCAS ANDRÉ BARROS FERREIRA, OZAWA BRASIL JÚNIOR, LUCIO ROBERTO CANÇADO CASTELLANO, and, PAULO ROGÉRIO FERRETI BONAN*

A 14-year-old patient presented with a complaint of "left ear lump," associated with a history of fever and 1 month of evolution, and not responding to broad spectrum antimicrobials. At the echoscopic examination, there was evidence of a nodular lesion in the left parietal region, sessile, with a fibroelastic consistency. Initially, the hypotheses were salivary gland inflammation or infectious disease. Exfoliative cytology and hemogram and serum serology for HIV, rubella, cytomegalovirus, toxoplasmosis, and venereal disease research laboratory test were requested, as well as a computed tomography scan of the skull with contrast. The hematologic and serologic tests were normal; however, the cytopathology showed a nonspecific chronic inflammatory infiltrate and structures compatible with eggs and body of a developed cestode. The tomographic examination ruled out neurocysticercosis. The treatment consisted of praziquantel, ceftriaxone, and supportive medications for 15 days, followed by the surgical excision of the lesion. Currently, he is being followed up with complete remission of the lesion, without significant surgical sequelae.

20190828

TOXOPLASMOSIS MIMICKING ACTINIC CHEILITIS: A CASE REPORT *TÁCIO CANDEIA LYRA, MANOEL DE OLIVEIRA DANTAS FILHO, JOSÉ MURILO BERNARDO NETO, ITALO DE LIMA FARIAS, MARCOS ANTONIO DE PAIVA FARIAS, DANYEL ELIAS DA CRUZ PEREZ, and, PAULO ROGÉRIO FERRETI BONAN*

A 33-year-old man sought treatment after presenting with an ulcerated lesion on the lower lip, symptomatic and associated with a history of fever and 1 year of evolution. The echoscopic examination showed evidence of solar lentigines on the face and symptomatic lymphadenopathy in the right submandibular region. Ulcerative lesions on the lower lip (mimicking actinic cheilitis) and maxillary vestibular fundus were observed by oroscopic examination. The initial hypotheses were infectious disease or an immunologically mediated process. Exfoliative cytology, incisional biopsy and hemogram, serologies for HIV and toxoplasmosis, and venereal disease research laboratory and Mantoux tests were performed. Histopathologically, nonspecific chronic inflammatory infiltrate was observed, and hematologic and serologic tests were normal, except IgM and IgG anti-toxoplasma were both positive. The cytology evidenced structures suggestive of bradyzoites and tachyzoites leading to the final diagnosis of toxoplasmosis. The patient was treated with sulfadiazine, pyrimethamine, and folinic acid. He is currently being followed up with complete remission of the lesions.

20190864

SOLITARY FIBROUS TUMOR MANIFESTING AS AN EXTENSIVE OROFACIAL SWELLING *AGUIDA MARIA MENEZES AGUIAR MIRANDA, ANDRÉ BEZERRA DE PINHO, JULIANA DE NORONHA SANTOS NETTO, SIMONE DE MACEDO AMARAL, ANDREIA MIRANDA ROCHA, RAFAELA CARRIÇO PORTO BAESSO, and, FÁBIO RAMÔA PIRES*

An 80-year-old male was referred for evaluation of an extensive swelling on the left side of the face lasting 1 year and with a previous diagnosis of nodular fasciitis. His medical history revealed arterial hypertension, aortic aneurysm, and partial carotid obstruction in clinical control. Clinical examination revealed a swelling in the left side of the face, with mild dystopia, associated with a swelling in the upper anterior and posterior left vestibule. Panoramic radiography showed no alteration in the region. Revision of the histologic slide from the previous biopsy was compatible with solitary fibrous tumor, and a new incisional biopsy was performed, confirming this histologic hypothesis. The patient was submitted to resection of the tumor, and the analysis of the surgical specimen confirmed the diagnosis of solitary fibrous tumor. The patient has been under clinical and radiographic follow-up for 6 months without evidence of local recurrence.

20190867

COSTOCHONDRAL AUTOGENOUS GRAFT AFTER RESECTION OF CENTRAL LESION OF GIANT CELLS IN THE MANDIBLE *ALAN VIEIRA COSTA DE SOUSA, RONIELE LIMA DOS SANTOS, JESSICA EMANUELLA ROCHA PAZ, ÍCARO GIRÃO EVANGELISTA, ALLYSON LUCAS LIMA, THIAGO JONATHAN SILVA DOS SANTOS, and, EDUARDO COSTA STUDART SOARES*

A 15-year-old male patient sought treatment complaining of "swollen face" (according to patient information). Physical examination showed painless swelling, of hard consistency on palpation, involving the regions of the mandibular body and parasymphysis. Imaging examination revealed a hypodense area of poorly defined margins between dental units 41 and 46 and