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*