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ORAL PRESENTATION—CLINICAL CASE

GLANDULAR ODONTOGENIC CYST IN THE POSTERIOR REGION OF THE MANDIBLE TREATED WITH RESECTION AND BONE

GRAFT: A CASE REPORT GLÓRIA MARIA DE FRANÇA, CAMILA TATYANNE SANTOS FREITAS, FERNANDA ARAGÃO FELIX, LUIS FERREIRA ALMEIDA-NETO, LUIZ CARLOS MOREIRA-JÚNIOR, PETRUS PEREIRA GOMES, and, HÉBEL CAVALCANTI GALVÃO

The glandular odontogenic cyst (GOC) is a cyst of unusual development, with glandular differentiation and potential for recurrence. This report proposes the description of a clinical case of GOC in the posterior region of the mandible exhibiting slight asymmetry to the extra-oral physical examination, multilocular radiographic appearance, expansion of the cortical bone, and reabsorption of involved teeth. An incisional biopsy and anatomicopathologic examination were performed. Seven criteria for diagnosis of GOC according to the World Health Organization (2017) were found, and 4 criteria were indicative of aggression and recurrence. In view of the aggressive behavior of these lesions, the indicated treatment was mandibular resection associated with bone graft of the iliac crest. Currently, the patient is being followed up with no signs of relapse for 2 years. It is concluded that clinical, microscopic, and radiographic parameters are useful tools in the prognosis of GOC and should be evaluated in the therapeutic choice to avoid relapses.

20190016

CLINICAL AND MOLECULAR ANALYSIS IN PAPILLON-LEFÈVRE SYNDROME RENATO ASSIS MACHADO, FLORENCE JUANA MARIA CUADRA ZELAYA, HERCÍLIO MARTELLI-JÚNIOR, RENATO CORRÊA VIANA CASARIN, MÔNICA GRAZIELI CORRÊA, FRANCISCO NOCITI, and, RICARDO D. COLETTA

Papillon-Lefèvre syndrome (PLS) is a cathepsin C (CTSC)-associated disorder characterized by palmar and plantar hyperkeratosis and aggressively progressing periodontitis. Here we report the clinical and genetic features of 5 PLS patients presenting with a severe periodontal breakdown in primary and permanent dentition, hyperkeratosis over the palms and soles, and recurrent sinusitis and/or tonsillitis. Mutation analysis revealed 2 novel homozygous recessive mutations (c.947 T>C and c.1010 G>C) and 1 previously described homozygous recessive mutation (c.901 G>A), with the parents heterozygous carriers, in 3 families (4 patients). The fourth family presented with the CTSC c.628 C>T heterozygous mutation, which was inherited maternally. The patient carrying the CTSC c.628 C>T mutation featured the classical PLS phenotype, but no PLS clinical characteristics were found in his carrier mother. These findings indicate that both homozygous and heterozygous mutations in

the cathepsin C heavy chain domain may lead to the classical PLS phenotype, suggesting roles for epistasis or gene-environment interactions on determination of PLS phenotypes.

20190029

RAPID PROTOTYPING AS AN AUXILLIARY IN AMELOBLASTOMA RESECTION. A CASE REPORT PEDRO HENRIQUE DA HORA SALES, DIEGO FEIJÃO ABREU, and, JAIR CARNEIRO LEÃO

A 25-year-old male patient was referred with a complaint of increased facial volume. Clinical examination revealed an intra-oral and extra-oral volume increase in the posterior region of the right side of the mandible, with a hard consistency and without painful symptomatology. Radiographic examination demonstrated a multilocular, radiolucent lesion with an image suggestive of an ameloblastoma. Histopathologic examination confirmed the diagnostic hypothesis. Faced with the complexity of the case, a total computerized tomography of the face was performed to observe in detail the area of the lesion as well as to make a stereolithographic model to facilitate the surgical planning and a preoperative adaptation of the reconstruction plate. Surgical treatment was performed through resection with extra-oral access, and the reconstruction plate was installed, showing a perfect adaptation and drastically reducing the surgical time. After 1 year of follow-up the patient shows no signs of relapse.

20190034

MANDIBLE EWING SARCOMA IN A 7-YEAR-OLD BOY: CLINICAL, RADIOGRAPHIC, AND DIAGNOSIS CONSIDERATIONS

SAMANTA VICENTE DE OLIVEIRA, LIGIA GONZAGA FERNANDES, LUIZ ALBERTO VALENTE SOARES JUNIOR, MARCELO FAVA DE MORAES, MARIA TEREZA ASSIS DE ALMEIDA, DÉCIO DOS SANTOS PINTO JR, and, FABIO DE ABREU ALVES

Ewing sarcoma (ES) is an aggressive form of bone/soft tissue cancer, and it is the second most frequent tumor in children and young adults, being very rare in jawbones. The aims of the present study are to emphasize the radiographic features of ES affecting the mandible and discuss the main differential diagnosis. A 7-year-old boy presented with a growth in the chin region with 2 months' of duration. Tomography showed a poorly delimited osteolytic lesion affecting the anterior region of the mandible, which caused tooth displacement. Moreover, periosteal reaction called sunburst phenomenon and moth-eaten aspect were also observed. Incisional biopsy was performed, and histopathologic and immunohistochemical features were consistent of ES. Treatment consisted of 14 chemotherapy cycles, resection of the anterior region of the mandible, and reconstruction with a fibula free flap. The patient is asymptomatic after 1 year from the surgery, and there is no evidence of local/systemic diseases.