20190071

LIPOID PROTEINOSIS: A RARE DISEASE IN PEDIATRIC DENTISTRY *ALAN GRUPIONI LOURENÇO, VERA CAVALCANTI DE ARAÚJO, FABRÍCIO PASSADOR-SANTOS, MARCELO SPERANDIO, BRAD NEVILLE, and, REGINA GARCIA DORTA*

This report describes the diagnostic process of lipoid proteinosis, a rare disorder with more than 300 reported cases, in a female child. The patient presented initially as a 7-year-old with multiple, whitish submucosal nodules of a fibrous consistency in the lower lip, but with an inconclusive pathology report. When she was 9 years old, she presented with exacerbation of the original clinical findings, which then involved the upper lip, buccal mucosa, and tongue. Dermatologic lesions were noted on the child's limbs and face, and the patient had developed a hoarse voice. Histopathologic examination of the buccal mucosa revealed dense connective tissue with hyaline foci, which were positive with periodic acid-Schiff staining and resistant to diastase digestion. MRI revealed calcium deposits in her amygdala, and nasopharyngolaryngoscopy revealed lesions in her vocal cords. The patient is currently stable and under multidisciplinary follow-up, but no treatment has been recommended.

20190099

A RARE CASE OF AMELANOTIC MELANOMA IN THE ORAL CAVITY *BRUNO TEIXEIRA GONÇALVES RODRIGUES, BRUNO AUGUSTO BENEVENUTO DE ANDRADE, MARIO JOSÉ ROMAÑACH, WAGNER PINTO DAS CHAGAS, NATHÁLIA DE ALMEIDA FREIRE, and, MÔNICA SIMÕES ISRAEL*

Amelanotic melanoma (AM) is a rare malignant lesion that presents a diagnostic challenge due to its wide clinical presentations, lack of pigmentation, and varied histologic appearances. Immunohistochemistry plays a crucial role in the diagnosis. We report a case of a 45-year-old male patient with a red and bleeding growth on the mandibular gingiva, resembling a pyogenic granuloma. An incisional biopsy was performed, and the histopathologic analysis was characterized by proliferation of nests and sheets of nonpigmented atypical epithelioid and plasmacytoid cells displaying a poorly delimited cytoplasm and hyperchromatic nucleus. Immunohistochemistry showed multifocal staining for melanocytic markers, S100 protein, HMB-45, Melan-A, and Ki-67 (95%). These findings confirmed the diagnosis of AM. The patient was referred to the oncologist who observed disease progression to the lungs, liver, and pancreas. The patient was under palliative care and medical follow-up but died. AM has a poor prognosis, with a high incidence of metastasis, recurrence, and death.

20190128

BUCCAL BIFURCATION CYST: A REPORT OF 2 CASES *LARISSA NATIELE MIOTTO, HEITOR ALBERGONI SILVEIRA, MATHEUS HENRIQUE LOPES DOMINGUETE, ALEXANDRE ELIAS TRIVALLATO, LUCIANA YAMAMOTO ALMEIDA, FERNANDA GONÇALVES BASSO, and, JORGE ESQUICHE LEÓN*

Buccal bifurcation cyst (BBC) is an uncommon inflammatory odontogenic cyst, often affecting the buccal region of the permanent mandibular first molars in pediatric patients. Diagnosis is primarily based on strict correlation of the clinical, imaginologic, and microscopic findings. Case 1: A 13-year-old male patient was referred after presenting with a nodular swelling with several months of evolution. Imaginologic analysis showed a well-delimited vestibular cortical bone expansion at the level of tooth #47. Case 2: An 11-year-old male patient was referred after presenting with a swelling with 6 months of evolution at the level of tooth #36. Computed tomography showed a vestibular expansive, hypodense lesion, with cortical bone preservation. In both cases, excisional biopsy with tooth preservation was performed. In the follow-up, healthy periodontium of the involved teeth was observed. In both cases, after clinicopathologic correlation, a BBC diagnosis was made. BBC should be considered in the differential diagnosis of expansive cystic or benign lesions affecting permanent mandibular molars.

20190129

KLIPPEL-TRENAUNAY AND STURGE-WEBER OVERLAPPING SYNDROME WITH CRANIOFACIAL IMPAIRMENT: A CASE REPORT *LETICIA RODRIGUES DE OLIVEIRA, GRAZIELA FIGUEREDO LIMA, RITA DE CÁSSIA D'OTTAVIANO NÁPOLE, MARCELO IVANDER ANDRADE WANDERLEY, REYNALDO ANTEQUERA, and, BRUNA LUIZA ROIM VAROTTO*

Klippel-Trenaunay syndrome (KTS) is characterized by a triad of port wine stains, venous malformations, and unilateral bone and/or tissue hypertrophy. Sturge-Weber syndrome (SWS) is a neurocutaneous syndrome of a classical triad of capillary malformations, ipsilateral leptomeningeal angiomatosis, and ocular involvement. The coexistence of KTS and SWS is rare, and only a few cases have been reported. Here, we describe a combination of KTS and SWS and report a case of a 27-year-old male patient, diagnosed with interictal dysphoric disorder, epilepsy, and mild intellectual disability. He presents with port wine stains involving the right side of his face and the right upper limb and skeletal hypertrophy. We also observed angiomatosis involving both lips on the right side causing macrocheilia, resulting in hypertrophy of buccal mucosa, malocclusion, and enlargement of the tongue. These characteristics add an extra challenge to the dental treatment and must be known by dental practitioners.

20190142

B-CELL LYMPHOBLASTIC LYMPHOMA AFFECTING THE MAXILLA: A CASE REPORT AND IMMUNOHISTOCHEMICAL ANALYSIS *HEITOR ALBERGONI DA SILVEIRA, LUCAS MOURA SOUSA, CAMILA DE OLIVEIRA BARBEIRO, LUCIANA YAMAMOTO ALMEIDA, CASSIO EDVARD SVERZUT, ALEXANDRE ELIAS TRIVELLATO, and, JORGE ESQUICHE LEÓN*

Lymphoblastic lymphoma (LBL) is a malignant neoplasia that originates from B or T lymphocyte precursors and comprises approximately 2% of all non-Hodgkin lymphoma cases. Maxillofacial region involvement by LBL is rare. We report a case of a 14-year-old female patient who was referred after complaining of pain, bleeding, and swelling on the right side of the maxilla. Computed tomography showed a solid mass over the entire region, reaching the maxillary sinus and nasal cavity. An

incisional biopsy was performed, which revealed large areas of lymphoid proliferation containing small- to medium-sized immature-appearing cells with scarce cytoplasm. Immunohistochemical analysis was positive for PAX5, CD79 a, TdT, CD10, Bcl-2, Bcl-6, and MUM-1; Ki-67 labeling index >96%. EBER 1/2 was negative. The patient was referred to hematologic and oncology service, but unfortunately died after starting chemotherapy. In conclusion, LBL, although rare, should be included in the differential diagnosis of maxillary osteolytic, expansive lesions, especially in pediatric patients.

20190178

VULVOVAGINAL GINGIVAL SYNDROME: A CHALLENGING DIAGNOSIS

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Vulvovaginal gingival syndrome is defined as a type of lichen planus involving the oral cavity causing desquamative gingivitis with the presence of erythema, pain, halitosis, and bleeding and provoking intensive erythema, pain, loss of the labia minora, vaginal stenosis, and sexual activity impairment due to inflammation and atrophy. A 45-year-old Caucasian woman visited the oral medicine clinic complaining gingival bleeding, lip sores, and severe pain. The patient reported a case of genital candidiasis for more than 10 years without success, with no other diseases reported. She was referred to the gynecology department of the CAISM-Unicamp, São Paulo/Brazil, where a biopsy from the genital mucosa was performed and confirmed genital lichen planus. The oral biopsy had the same result, and lichen planus was confirmed again. With the result of vulvovaginal gingival syndrome, this case is being managed with the use of topical and systemic corticosteroids.

20190209

DISSEMINATED HISTOPLASMOSIS IN A NON-HIV PATIENT: A CASE REPORT

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Histoplasmosis is a systemic infectious disease caused by the fungus Histoplasma capsulatum, which is present in contaminated soils. Infection occurs by inhaling microconidia from the filamentous phase of the fungus, and 1 of the variations of the clinical spectrum of this disease is to affect immunocompromised patients. A female patient, 41 years old, complained of dysphagia and weight loss. Her habits were positive for alcoholism, and she was a nonsmoker, with a medical history of hepatitis B, ganglionar and pulmonary tuberculosis, and intestinal histoplasmosis 4 years ago, negative for HIV infection. Intra-oral examination showed a granulomatous ulcer in soft and hard palate transition on the right and presence of lymphadenopathy at the submandibular region bilaterally. The incisional biopsy was performed, and material was sent for polymerase chain reaction analysis of leishmaniasis, with negative result. Histopathologic examination confirmed histoplasmosis. Treatment with amphotericin B was started, and after 2 months the oral lesion regressed but gut infection persisted.

20190217

MYCOPLASMA SALIVARIUM INFECTION IN THE ORAL MUCOSA 3 YEARS AFTER ALLOGENEIC HEMATOPOIETIC STEM CELL TRANSPLANTATION

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A female patient, 47 years old, presented 3 years after allogeneic hematopoietic stem cell transplantation related to myelodysplastic syndrome in immunosuppression for chronic graft-versus-host (GVHD) disease treatment for the mouth, eyes, and skin grade II lesions. The patient reported significant burning in the oral mucosa. Oral examination showed an erythematous and bleeding mucosa with multiple shallow ulcerations. Anatomopathology identified inflammation without criteria for GVHD. Grocott methenamine silver and Ziehl-Neelsen staining, immunohistochemistry, viral PCR, and fungal and bacteria cultures were negative for infection. Amplification of the 16S rDNA gene for mycoplasma was performed by means of real-time PCR that presented positive results in all triplicates (Ct≅27; 103 genome copies/μL). Sequencing of samples (ABI 3500xL Genetic Analyzer, ThermoFisher Scientific) showed 99% genetic identity with *Mycoplasma salivarium* (MS-accession number NR_113661.1). Seventy-two hours after doxycycline treatment, complete resolution of oral lesions was observed, and PCR for MS after 10 days was negative. MS infections should be considered in nonspecific acute inflammatory processes, especially after HSCT.

20190224

CONGENITAL SIALOLIPOMA ON THE TONGUE DORSUM: A CASE REPORT

VIVIANE SILVA SIQUEIRA, ANA LÚCIA ROSELINO RIBEIRO, ANELISE RIBEIRO PEIXOTO DE ALENCAR, ANDRESA BORGES SOARES, JAYNE BATISTA LIMA, ALLINE JESUINO DE OLIVEIRA, and, THEURE SALES SILVA

Sialolipoma is a rare benign neoplasm of the salivary glands that was recently described in the literature, and, until now, fewer than 60 cases have been reported. A 9-year-old child presented complaining of tongue injury. Intra-oral examination revealed a pediculus nodulus lesion with fibrous consistence with 15 mm in maximum diameter, located in the posterior dorsum of the tongue. The child's parents reported that they had noticed the lesion since her birth. An excisional biopsy was performed based on the initial clinical diagnosis of a fibroepithelial polyp. Histologic examination of the lesion showed a benign neoplastic proliferation of adipocytes and also serous and mucous acini, involved with dense connective tissue. The definitive diagnosis was sialolipoma of the tongue dorsum. The patient has had no evidence of recurrence at 1 year of follow-up.