Abstracts of the XXII Brazilian Congress of Oral Medicine and Oral Pathology

ORAL PRESENTATIONS

AO-01 - ORAL MANIFESTATIONS OF SYPHILIS: REPORT OF 3 CASES. *LUCIANA YAMAMOTO DE ALMEIDA, LUCIANA ROCHA STRIEDER, VICTOR BERNARDES BARROSO DA COSTA, JORGE ESQUICHE LEÓN, FERNANDA DOS SANTOS MOREIRA, YASMIN RODARTE CARVALHO, ESTELA KAMINAGAKURA TANGO. FACULDADE DE ODONTOLOGIA DE SÃO JOSÉ DOS CAMPOS – UNESP.*

Syphilis is a sexually transmitted disease caused by *Treponema pallidum* infection. Primary syphilis of the oral cavity manifests as a solitary ulcer, usually affecting the lip or tongue, which can be confused with other solitary ulcerative lesions of traumatic, benign, or malignant origin. Oral manifestations of secondary syphilis can be more extensive and variable than are those of primary syphilis. Histopathology is not always helpful, because the detection of causal agent by histochemical stains or immunohistochemistry might not be possible. Therefore, clinicopathological correlation associated with serological studies is essential in establishing the diagnosis of syphilis. We report 3 cases of syphilis, emphasizing the importance of the identification of oral lesions to the final diagnosis. In all cases, incisional biopsy specimens were highly suspicious for syphilis, which was confirmed by serological tests. Clinicians must be familiarized with the oral manifestations of syphilis, an emerging disease with varied clinical aspects.

AO-02 - ORAL MYELOID SARCOMA ASSOCIATED WITH ACUTE PROMYELOCYTIC LEUKEMIA. *ALINE CORREA ABRAHÃO, MICHELLE AGOSTINI, ELLEN BRILHANTE CORTEZZI, OSLEI PAES DE ALMEIDA, ALÍCIA RUMAYOR PIÑA, MÁRCIA GRILLO CABRAL, MÁRIO JOSÉ ROMAÑACH GONZALEZ SOBRINHO. UNIVERSIDADE FEDERAL DO RIO DE JANEIRO/FACULDADE DE ODONTOLOGIA DE PIRACICABA – UNICAMP.*

Myeloid sarcoma is an extramedullary tumor composed of immature myeloid or granulocytic cells. It occurs in less than 10% of patients with acute myeloid leukemia, and involvement of the oral cavity is common. A 24-year-old female was referred for investigation of a 14-day history of rapidly progressing gingival swelling, accompanied by fever and fatigue. Extraoral examination revealed cervical lymphadenopathy. Intraoral examination showed a painful bluish swelling, with a necrotic surface, in the right posterior mandibular gingiva. A gingival biopsy specimen showed diffuse infiltration of undifferentiated tumor cells with granulocytic appearance, which were highly immunoreactive for CD5, CD99, and myeloperoxidase. Blood tests indicated severe pancytopenia, and a t(15;17) chromosomal translocation confirmed bone marrow involvement of acute promyelocytic leukemia. The final diagnosis was oral myeloid sarcoma associated with acute promyelocytic leukemia. The patient underwent chemotherapy but died 1 month later.

AO-03 - PROSTATIC ADENOCARCINOMA WITH MANDIBULAR METASTATIC LESION. *FERNANDA MOMBRINI PIGATTI, DÁRCIO KITAKAWA, FABIO DAUMAS NUNES. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Distant metastases of malignant neoplasms to the head and neck region are rare. The most common primary sites of carcinomas are, in order of decreasing incidence, the breast, kidney, lung, prostate, thyroid, and colon. Within the maxillofacial area, the most common site is in the molar region of the mandible. In the majority of patients that present metastasis to the oral cavity, the primary tumor has been well diagnosed and treated. A 70-year-old male presented with painful swelling of the right mandible and a history of prostate cancer 4 years earlier. Radiological investigation demonstrated a lesion within the right mandibular body, and immunohistochemical studies of a subsequent biopsy confirmed the diagnosis of metastatic prostate cancer. The neoplastic cells were positive for AE1/AE3 and PSA, and focally positive for racemase. Prior knowledge of the primary tumor guided the complementary study to the correct diagnosis.

AO-04 - LEPROSY, PARACOCCIDIOIDOMYCOSIS, AND SQUAMOUS CELL CARCINOMA: DIAGNOSTIC INEFFICIENCY OR A PUBLIC HEALTH SYSTEM FAILURE?. *MAYARA BARBOSA VIANDELLI MUNDIM, ALEXANDRE BELLOTTI FERREIRA, ALLISSON FILIPE LOPES MARTINS, ELISMAURO FRANCISCO DE MENDONÇA, REJANE FARIA RIBEIRO-ROTTA. UNIVERSIDADE FEDERAL DE GOIÁS.*

Despite public health policies aimed at controlling leprosy and paracoccidioidomycosis in Brazil, some cases are still detected only in the advanced stages. We report a case of a severe association between these 2 infectious diseases and a malignant neoplasm, with the objective of promoting reflection on the apparent deficiency of the public health system in monitoring endemic diseases. A 48-year-old male, diagnosed with leprosy and paracoccidioidomycosis in 2002, was referred to an oral medicine center in 2011 with proliferative lesions and hypopigmented spots in the perioral and nasal regions, together with loss of nasal cartilage, resulting in total obstruction of the nostrils, and microstomia. Histological evaluation of an incisional biopsy showed squamous cell carcinoma associated with a granulomatous fungal lesion. The patient was referred to a facility specializing in oncology and infectious diseases. Nevertheless, he died 6 months after starting treatment.

AO-05 - DESMOPLASTIC AMELOBLASTOMA IN MANDIBLE. *GABRIELA SANCHEZ NAGATA, LÍLIA ALVES ROCHA, GABRIELA FUKUNAGA KATO, JULIANE PIRÁGINE ARAÚJO, ANDRÉ CAROLI ROCHA, FÁBIO DE ABREU ALVES, DÉCIO DOS SANTOS PINTO JÚNIOR. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Desmoplastic ameloblastoma is a variant of ameloblastoma, with a specific clinical, radiographic, and histopathological profile. A 55-year-old White male presented with complaints of pain and coldness in the posterior region of mandible. The patient presented

with displacement of premolar teeth accompanied by expansion of the mandibular cortical bone, but had no systemic disorders. Panoramic radiography showed a single, 2.5-cm, well-defined lesion, with a mixed radiolucent-radiopaque pattern, located between teeth #33 and #35. On the basis of a diagnostic hypothesis of odontogenic tumor, desmoplastic ameloblastoma, or ossifying fibroma, an incisional biopsy was performed. Histopathological examination revealed a neoplasm composed of odontogenic epithelial cells arranged in islets with acute angles or in long, thin strands. The neoplastic cells were embedded in a stroma with dense connective tissue and a few fragments of bone tissue. The final diagnosis was desmoplastic ameloblastoma. The mass was excised completely with wide margins, and no recurrence was observed during follow-up.

AO-06 - FACIAL EFFECTS OF OSTEODYSTROPHY ASSOCIATED WITH CHRONIC RENAL INSUFFICIENCY: 2 CASE REPORTS. *VICTOR DINIZ BORBOREMA DOS SANTOS, MÁRCIO MENEZES NOVAES, HAROLDO ABUANA OSÓRIO JUNIOR, RIVALDO PEREIRA DOS SANTOS, ROSEANA DE ALMEIDA FREITAS, JOSÉ SANDRO PEREIRA DA SILVA, ADRIANO ROCHA GERMANO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO NORTE.*

Renal osteodystrophy refers to all disorders of calcium and phosphate metabolism that cause abnormalities of the musculoskeletal system after chronic renal insufficiency (CRI). We present 2 cases of patients with renal osteodystrophy associated with CRI who presented with aesthetic complaints (facial deformity) and functional complaints (respiratory and visual difficulties). Both patients had been previously undergone parathyroidectomy, but presented extensive lesions in the mid and the lower third of the face, characteristic of leonine facies. Computed tomography revealed a mixed lesion showing exophytic and endophytic growth, with invasion of the nasal cavity and orbital floor in 1 of the cases. After incisional biopsies, both patients were submitted to bone reconstructive surgery under general anesthesia. Various clinical procedures of a systemic nature were performed in order to reduce surgical risk. At this writing, both patients have made satisfactory progress, with functional and aesthetic improvements.

AO-07 - PERIPHERAL ODONTOMA: A RARE LESION AT AN UNUSUAL AGE. *ÉRICA FERNANDA PATRICIO DA SILVA, CLAUDIA FABIANA JOCA DE ARRUDA, JULIANE PIRÁGINE ARAÚJO, ARIANE VENZON DA NAIA SARDO, LARA CRISTINA OLIVER GIMENEZ, MARÍLIA TRIERVEILER MARTINS, CAMILA DE BARROS GALLO. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Although central odontomas are the most common type of odontogenic tumors, peripheral odontomas are quite rare. Diagnosis is usually established between the first and second decades but can be made at any age. Peripheral odontoma usually manifests as small, asymptomatic lesions, with no evidence of a central odontoma. An 11-year-old White female sought treatment at the outpatient clinic of an oral diagnosis service, presenting with a 2-year history of sessile nodular lesion, next to the incisive papilla, that was asymptomatic, normal in color, and measured approximately 2 cm. Because the working diagnoses were peripheral ossifying fibroma and peripheral giant cell lesion, an excisional biopsy was performed. No bone involvement was observed on periapical radiographs or intraoperatively. Microscopic study confirmed the diagnosis of peripheral odontoma. The patient is under periodic observation. To date, no further complications or signs of recurrence have been observed.

AO-08 - WAARDENBURG SYNDROME TYPE I: REPORT OF CASES WITH DENTAL PHENOTYPES AND GENETIC ANALYSIS. *EDIMILSON MARTINS DE FREITAS, LUCIANO SÓLIA NASSER, SIBELE NASCIMENTO DE AQUINO, RICARDO DELLA COLETTA, LÍVIA MARIS PARANAÍBA, PEDRO DOS SANTOS NETO, HERCÍLIO MARTELLI JÚNIOR. UNIVERSIDADE ESTADUAL DE MONTES CLAROS.*

Waardenburg syndrome (WS) is a rare autosomal dominant disorder characterized by congenital sensorineural hearing loss, and dystopia canthorum, together with depigmentation of the hair, skin, and iris (heterochromic or hypochromic iris). This study describes a family with WS type I (WS-I), detailing the dental abnormalities and screening for *PAX3* mutations. We evaluated 29 members of that family by dermatological, ophthalmological, otorhinolaryngological, and orofacial examination. Molecular analysis of the *PAX3* gene was performed. Features of WS-I were observed in 16 family members, 9 showing 2 major criteria indicative of WS-I. Five patients showed white forelock and iris hypopigmentation and 4 showed dystopia canthorum and iris hypopigmentation. Two had hearing loss; and 3 had dental abnormalities (dental agenesis, conical teeth, and taurodontism). Sequencing analysis failed to identify *PAX3* mutations. In the family studied, tooth agenesis and conical teeth were the major clinical features of WS-I, which was transmitted in an autosomal dominant manner, with variable expressivity and high penetrance.

AO-09 - AMELOGENESIS IMPERFECTA AND NEPHROCALCINOSIS SYNDROME: A PHENOTYPIC CHARACTERIZATION. *MAURÍCIO DA ROCHA DOURADO, CÁSSIO ROBERTO ROCHA DOS SANTOS, PRISCILLA BARBOSA DINIZ, RICARDO DELLA COLETTA, ANA TEREZINHA MARQUES MESQUITA. UNIVERSIDADE FEDERAL DOS VALES DO JEQUITINHONHA E MUCURI.*

Amelogenesis imperfecta (AI) is a complex group of conditions that cause inherited defects of dental enamel. Nephrocalcinosis (NC) is the deposition of calcium salts in the renal parenchyma, which can lead to renal disorders. When occurring concomitantly, these 2 conditions constitute the AI and NC syndrome, an autosomal recessive disorder with few cases reported in the literature. We investigated the characteristics of this syndrome in 9 patients from 4 Brazilian families. The patients were identified through clinical examination, together with radiographic, renal, and hematological investigation, as well as analysis of biochemical markers. Clinical examination revealed small, yellowish teeth; retention of deciduous dentition; and gingival hyperplasia. The radiographs showed pericoronal radiolucencies involving impacted permanent teeth and intrapulpal calcifications. Biochemical tests showed abnormalities in 4 patients. Although ultrasonography revealed bilateral NC, none of the patients showed any sign of renal disease. These results underscore the need for renal evaluation in patients with AI.

AO-10 - SIMPLE BONE CYST AND KERATOCYSTIC ODONTOGENIC TUMOR: CASE REPORT OF 2 INDEPENDENT LESIONS. *SAIONE CRUZ SÁ, DANIELA PITA DE MELO, BERNARDO FERREIRA BRASILEIRO, FRANCISCO HAITER NETO, PAULO SÉRGIO FLORES CAMPOS. FACULDADE DE ODONTOLOGIA DE PIRACICABA – UNICAMP.*

The simultaneous occurrence of multiple lesions in the mandible has previously been reported, although most such reports were of cases in which 2 types of lesions were associated and often dependent, such as simple bone cyst (SBC) and bone dysplasia. We report the simultaneous, independent occurrence of an SBC and a keratocystic odontogenic tumor (KOT), both in the mandible. The 2 lesions were distinct, the SBC being located in the symphysis and the KOT being located in the ramus. We describe the diagnosis of and treatment planning for the SBC and KOT, both of which were identified with cone-beam computed tomography, as well as the outcome at 4 years after surgery.

AO-11 - HYBRID ODONTOGENIC TUMOR IN THE POSTERIOR MAXILLA: A CASE REPORT. *BÁRBARA GRESSY DUARTE SOUZA CARNEIRO, CARLOS DIEGO LOPES SÁ, MÁRIO ROGÉRIO LIMA MOTA, FABRÍCIO BITU SOUSA, ANA PAULA NEGREIROS NUNES ALVES, FÁBIO WILDSON GURGEL COSTA, EDUARDO COSTA STUDART SOARES. NIVERSIDADE FEDERAL DO CEARÁ.*

During child development, a variety of benign neoplasms can be diagnosed. A 15-year-old patient was referred for orthodontic treatment. The initial examination revealed no facial or intraoral swelling, and a panoramic radiograph was ordered for treatment planning. On the radiograph, a mixed radiolucent/radiopaque maxillary lesion was observed in close proximity to the left second molar. Cone-beam computed tomography revealed a 2-cm well-defined hyperdense mass associated with a malformed and unerupted third molar, which was surrounded by a thin hypodense region. An excisional biopsy was performed, and the surgical specimen was sent for histopathological analysis. The final diagnosis was hybrid odontogenic neoplasm (calcifying cystic odontogenic tumor and ameloblastic fibro-odontoma). The patient was carefully followed-up for 12 months. To our knowledge, this represents the first reported case of posterior maxillary hybrid odontogenic tumor with features of calcifying cystic odontogenic tumor and ameloblastic fibro-odontoma.

AO-12 - BILATERAL SIMPLE BONE CYSTS COMPLICATED BY ORTHODONTIC TREATMENT AND REFRACTORY TO SURGICAL TREATMENT: REPORT OF A CASE WITH 10 YEARS OF FOLLOW-UP. *SARA JULIANA DE ABREU VASCONCELLOS, JULIANA BATISTA MELO DA FONTE, JOANES SILVA SANTOS, RICARDO LUIZ CAVALCANTI DE ALBUQUERQUE JÚNIOR, WILTON MITSUNARI TAKESHITA, MARIA DE FÁTIMA BATISTA DE MELO. UNIVERSIDADE FEDERAL DE SERGIPE/ UNIVERSIDADE TIRADENTES.*

Simple bone cyst (SBC) is a pseudocyst of the bones, rarely found in the jaws. An SBC is usually unilateral and presents limited growth potential. An 11-year-old male presented with 2 small bilateral "cyst-like" radiolucent areas in the mandible, between the roots of the first molars, found in a routine radiological examination performed for orthodontic purposes. Radiological follow-up of the orthodontic treatment after 2 years showed extensive bilateral lesions of approximately 5 cm in diameter. Surgical exploration revealed a pathologic cavity containing serous-bloody fluid, characteristic of SBC, in each lesion. Curettage of the bone walls was also performed. At 3 years of follow-up, the lesion on the left was markedly smaller, whereas the lesion on the right showed no sign of remission. The relevance of this report lies in the unusual clinical presentation and atypical biological behavior of bilateral SBCs of the mandible.

AO-13 - THE DIAMOND–BLACKFAN ANEMIA AND ITS COMPLICATIONS: STOMATOLOGICAL REPERCUSSIONS. *LUÍSA CIDÁLIA GALLO DE ALMEIDA, RITA FABIANE TEIXEIRA GOMES, MARCO ANTONIO TREVIZANI MARTINS, MARIA CRISTINA MUNERATO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL.*

Diamond–Blackfan anemia consists of pure congenital erythroid aplasia, characterized by bone marrow failure, macrocytic anemia, and reticulocytopenia. In 50% of cases, there are physical anomalies, of varying severity, including cardiac anomalies, genitourinary anomalies, craniofacial anomalies (hypertelorism or deep palate), and malformations of the thumbs. Some patients (70%) respond well to steroid therapy, although 40% are dependent on chronic blood transfusions. Bone marrow transplant is the only curative therapy for the disease. A 19-year-old White female was hospitalized for febrile neutropenia, anemia, and urinary tract infection, together with ulcerated, painful, bleeding oral lesions that were crateriform with surface necrosis. Patients with severe neutropenia develop hidden infectious foci (in the oral cavity in 25%), the first sign of which is fever. Such foci develop rapidly and are potentially fatal, making early diagnosis and treatment essential. After antimicrobial therapy, transfusions, and hemodynamic stabilization, there was complete remission of the oral lesions.

AO-14 - SAGLIKER SYNDROME IN AN END-STAGE RENAL DISEASE PATIENT WITH SECONDARY HYPERPARATHYROIDISM AND LOCALIZED MANDIBLE ENLARGEMENT: A CASE REPORT. *WAGNER GOMES DA SILVA, OSLEI PAES DE ALMEIDA, PABLO AGUSTIN VARGAS, KARINA MORAIS FARIA, MÁRCIO AJUDARTE LOPES, RICARDO DELLA COLETTA, ALAN ROGER DOS SANTOS SILVA. FACULDADE DE ODONTOLOGIA DE PIRACICABA – UNICAMP.*

Sagliker syndrome (SS) is a relatively new entity, first described in 2004, that occurs in patients with chronic kidney disease-mineral and bone disorder who also have severe, uncontrolled secondary hyperparathyroidism (SHPT). The syndrome manifests as severe maxillary and mandibular deformities that can cause an disfiguring human face appearance; short stature; benign oral tumors; dental abnormalities; fingertip changes; knee and scapula deformities; hearing loss; and psychological disorders. Here, we report a case of SS affecting a young Black male with a history of end-stage renal disease secondary to vesicoureteral reflux, associated with SHPT. The patient had undergone a failed kidney transplant 5 years earlier and had long been on dialysis. In addition to ground-glass radiopacity of the maxillary and mandibular bones, together with other craniofacial deformities and developmental anomalies, we observed localized mandibular enlargement.

AO-15 - ENAMEL–RENAL SYNDROME: EXPANDING THE PHENOTYPE? *MÁRIO RODRIGUES DE MELO FILHO, RICARDO DELLA COLETTA, LUIS ANTÔNIO NOGUEIRA DOS SANTOS, BRENO AMARAL ROCHA, ANDRÉ LUIZ SENA GUIMARÃES, SABINA PENA BORGES PEGO, HERCÍLIO MARTELLI JÚNIOR. UNIVERSIDADE ESTADUAL DE MONTES CLAROS.*

Amelogenesis imperfecta (AI) is a heterogeneous group of hereditary disorders that affect dental enamel. Nephrocalcinosis is deposition of calcium in renal tissue. The rare syndrome of AI with nephrocalcinosis is designated enamel–renal syndrome (ERS; OMIM no. 204690). Since the first report, only another 11 cases have been described in the literature. We report a case

of ERS with novel findings, including hearing loss and hypertrichosis. A 10-year-old female who had been born of consanguineous parents presented with yellow, misshapen teeth; intrapulpal calcifications; delayed tooth eruption; and gingival enlargement. Radiographic examination showed incomplete permanent dentition. Renal ultrasound showed bilateral nephrocalcinosis. Because nephrocalcinosis is often asymptomatic and can be associated with impaired renal function, dentists play an important role in recognizing ERS. The present report expands the phenotypic spectrum of this uncommon syndrome.

AO-16 - ROSAI–DORFMAN DISEASE WITH ORAL INVOLVEMENT. *CAMILA MARIA BEDER RIBEIRO, ANA PAULA FERNANDES BARBOSA, MATHEUS HENRIQUE ALVES DE LIMA, MICHELE GASSEN KELLERMANN, JORGE ESQUICHE LEÓN, KARINE CÁSSIA BATISTA LÚCIO E SILVA, SONIA MARIA SOARES FERREIRA. CENTRO UNIVERSITÁRIO CESMAC.*

Rosai–Dorfman disease (RDD) is an uncommon benign proliferation of histiocytes commonly characterized by painless, massive cervical lymphadenopathy. Up to half of all patients with nodal RDD develop extranodal involvement, which occurs preferentially in the head and neck region. Oral manifestations of RDD are quite rare, and usually affect younger patients. A 9-year-old female was referred to a stomatology service for a 2-year history of painful oral swelling, together with fever, weight loss, and diminished vision. An excisional biopsy was performed, and the final diagnosis was RDD. At 2 years of follow-up, there was cervical lymph node involvement without oral alterations, and computed tomography showed involvement of the orbit and paranasal sinus. The current case shows that RDD should be included in the differential diagnosis of oral manifestations of benign or malignant histiocytosis. We discuss the role of stomatologist in the diagnosis and clinical management of RDD.

AO-17 - LOW-GRADE PAPILLARY ADENOCARCINOMA OF THE PALATE: A CASE REPORT. *MÁRCIO CAMPOS OLIVEIRA, RAFAEL SANTOS LIMA, PEDRO GABRIEL DANTAS GUEDES, ANA PAULA EUFRÁZIO DO NASCIMENTO ANDRADE, MABEL CANCIO HAYNE, DANIELLA SANTOS MARINHO DE ALMEIDA SILVA, MARINA MARTINS CAJAHIBA. UNIVERSIDADE ESTADUAL DE FEIRA DE SANTANA.*

Low-grade papillary adenocarcinoma (LGPA) represents a relatively rare histological variant of polymorphous low-grade adenocarcinoma (PLGA). There has been a debate as to whether LGPA is associated with greater aggressive potential than is PLGA. A 42-year-old Black male, a farmer, presented with an 18-month history of asymptomatic mass on the hard palate. The mass was 20 mm in diameter, pinkish in color, and firm on palpation. On the basis of a diagnostic hypothesis of pleomorphic adenoma or inflammatory lesion, surgery was scheduled. The results of preoperative examinations were within normal limits, and the surgical procedure was performed without complications. Histopathological examination of the surgical specimen indicated an LGPA of the palate. On postoperative days 7 and 14, there were no abnormalities. The patient was referred to a specialized hospital for treatment of the lesion and is currently waiting for the medical team responsible for the case to devise a therapeutic plan.

AO-18 - DISTINCT CLINICAL AND MICROSCOPIC FEATURES OF ADENOID CYSTIC CARCINOMA: 3 CASE REPORTS. *DIEGO ANTONIO COSTA ARANTES, NÁDIA DO LAGO COSTA, ALINE CARVALHO BATISTA, ELISMAURO FRANCISCO DE MENDONÇA, ENEIDA FRANCO VENCIO, REJANE FARIA RIBEIRO-ROTTA. UNIVERSIDADE FEDERAL DE GOIÁS.*

Adenoid cystic carcinoma (ACC) is a malignant, slow-growing neoplasm and is usually fatal. It represents 10-15% of salivary gland malignancies, and nearly half of all cases of ACC occur in the minor salivary gland. We report 3 cases of ACC in patients who were distinct in terms of demographic characteristics, as well as in terms of the location, clinical profile, and radiographic features of the ACC: a 49-year-old female presenting with swelling of the buccal mucosa; a 25-year-old female presenting with an ulcerated lesion in the hard palate, without radiographic findings; and a 49-year-old male complaining of a painful lump in the mandible, which was identified as a large osteolytic lesion with irregular margins, extending to the mandibular body and ramus. Histopathological examination revealed a biphasic neoplasm composed of a dual population (ductal and myoepithelial cells) with tubular, cribriform, or solid growth patterns. In all cases, the lesions were resected with wide surgical margins, and different prognoses were established. Clinical, radiographic, and microscopic features are discussed.

AO-19 - ORAL MANIFESTATION OF HISTOPLASMOSIS ON THE PALATE: A CASE REPORT. *MARIANA KLEIN, BÁRBARA CAPITANIO DE SOUZA, MANOELA DOMINGUES MARTINS, MARCO ANTONIO, TREVIZANI MARTINS, MARIA CRISTINA MUNERATO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL.*

Histoplasmosis is a systemic mycotic disease caused by the dimorphic fungus, *Histoplasma capsulatum* and can have a variety of clinical manifestations. Lesions in the oral mucosa are quite rare, occurring as a feature of disseminated histoplasmosis or as isolated involvement. An 81-year-old male patient sought treatment at a clinic of stomatology, complaining of ulceration of the palate. Physical examination revealed a granular ulcerated lesion with red and yellow dots inside, measuring 25 mm, at the junction of the hard and soft palate. An incisional biopsy was performed, and staining of histological sections with hematoxylin–eosin and Grocott's methenamine silver disclosed positivity for *H. capsulatum*. Clinical evaluation also revealed pulmonary involvement. The treatment regimen adopted was itraconazole (200 mg/day). After 30 days of treatment, there was significant clinical improvement and regression of the oral lesions.

AO-20 - VERRUCIFORM XANTHOMA OF THE GINGIVA: CASE REPORT. *JANDERSON TEIXEIRA RODRIGUES, ÁGUIDA MARIA MENEZES AGUIAR MIRANDA, SIMONE MACEDO AMARAL, JULIANA DE NORONHA SANTOS NETTO, FÁBIO RAMOA PIRES. UNIVERSIDADE ESTÁCIO DE SÁ/ASSOCIAÇÃO BRASILEIRA DE ODONTOLOGIA – RIO DE JANEIRO.*

Verruciform xanthoma is a reactive hyperplastic lesion of the oral mucosa that can clinically resemble other reactive or neoplastic papillary lesions. A 66-year-old female presented with a 1.2 × 0.6 cm painless papillary growth in the free gingiva of the upper right central incisor. The differential diagnosis included papillary gingival hyperplasia, condyloma acuminatum, and verruciform xanthoma. An excisional biopsy was performed under local anesthesia, and staining of 5-μm sections with

hematoxylin-eosin revealed a proliferative surface epithelium showing acanthosis, parakeratosis, and superficial papillary projections. On the upper papillary superficial connective tissue, there were also several xanthomatous cells, which immunohistochemistry showed to be CD68+. The final diagnosis was verruciform xanthoma. No signs of local recurrence were detected after 2 months of clinical follow-up. Verruciform xanthoma usually affects the gingiva and should be considered in the differential diagnosis of papillary swellings in the oral cavity.

AO-21 - ORAL METASTASIS OF A COLON ADENOCARCINOMA. *FÁBIO WILDSON GURGEL COSTA, DIEGO FELIPE SILVEIRA ESSES, ERNEST CAVALCANTE POUCHAIN, MÁRIO ROGÉRIO LIMA MOTA, ANA PAULA NEGREIROS NUNES ALVES, RÉGIA MARIA DO SOCORRO VIDAL DO PATROCÍNIO, EDUARDO COSTA STUDART SOARES. UNIVERSIDADE FEDERAL DO CEARÁ.*

Metastatic tumors account for approximately 1% of malignant oral neoplasms. Although colon adenocarcinoma is a common cancer, reports of oral metastases are rare. An 81-year-old male presented with mandibular swelling that had arisen approximately 3 months earlier, after extraction of tooth #45, and was associated with neuropathy. The medical history included a diagnosis of colon adenocarcinoma with liver metastasis. Clinically, we observed right mandibular swelling associated with an ulcerated nodule. Radiographically, a mixed lesion with a sunburst pattern was observed. An incisional biopsy was performed, and histopathological analysis revealed adenocarcinoma. Immunohistochemical analysis showed positivity for CDX2, CK20, and CEA, although not for CK7, thus confirming the diagnosis of metastatic colon adenocarcinoma. Although the patient underwent chemotherapy, he died within the first 2 months after diagnosis of the oral metastasis. This case underscores the importance of clinical and imaging features as possible signs of metastatic disease in the oral cavity.

AO-22 - OSSIFYING FIBROMA OF THE MAXILLA WITH A LONG-TERM EVOLUTION. *RODRIGO NASCIMENTO LOPES, ANDRÉ GUOLLO, PAULO ANDRÉ GONÇALVES DE CARVALHO, ANDRÉ CAROLI ROCHA, JOSÉ DIVALDO PRADO, CLÓVIS ANTÔNIO LOPES PINTO, FÁBIO DE ABREU ALVES. AC CAMARGO CANCER CENTER.*

Ossifying fibroma (OF) is a slow-growing benign neoplasm composed of fibrocellular tissue and mineralized material. It occurs mostly in females from the second to fourth decade of life and affects mainly the posterior mandible. A 55-year-old male presented with a 10-year history of swelling that caused marked facial asymmetry. Clinical and radiographic examination revealed a huge mass in the right maxilla, expanding the hard palate and orbital floor. A large amount of calcified tissue was observed. The working diagnosis was low grade osteosarcoma and OF. An incisional biopsy was performed, and the results were consistent with the diagnosis of OF. The patient was submitted to radical maxillectomy with bone graft for reconstruction of the orbital floor. During a 2-year follow-up period, there was no recurrence. Although OFs can be quite large, surgical resection is an effective treatment. Nevertheless, close clinical and radiographic follow-up is required.

AO-23 - DIAGNOSIS AND MANAGEMENT OF MUCOEPIDERMOID CARCINOMA: 2 CASE REPORTS. *ALEXANDRE BELLOTTI FERREIRA, MARCELLA SILVA DE PAULA, MILA CRISTINE NASCIMENTO, ELISMAURO FRANCISCO DE MENDONÇA, ALINE CARVALHO BATISTA, NÁDIA DO LAGO COSTA, REJANE FARIA RIBEIRO-ROTTA. UNIVERSIDADE FEDERAL DE GOIÁS.*

Mucoepidermoid carcinoma (MEC) is the most common malignant tumor of salivary glands, mainly affecting the parotid gland and minor salivary glands. Here, we report 2 cases of MEC that had histopathological similarities and yet were treated with different approaches. The first case was that of an 18-year-old male with facial asymmetry and a rubber-floating mass in the right hard palate, who reported accelerated growth of the mass in the last months. The second case was in an 11-year-old female, who complained of a lump in her mouth, which had first appeared 2 years earlier and presented as a resilient mass in the left hard and soft palate. The clinical behavior and radiographic features of the 2 neoplasms, both of which were identified as MEC, supported different treatment options. The first case was treated with resection of the right maxilla and zygoma, followed by radiotherapy, whereas the second case was treated with local resection alone. Clinical, radiographic, and microscopic features of MEC are discussed in light of the literature.

AO-24 - SEVERE FACIAL INFECTION ASSOCIATED WITH BENIGN ODONTOGENIC LESIONS: REPORT OF 2 CLINICAL CASES. *HAROLDO ABUANA OSÓRIO JUNIOR, DANIELLE CLARISSE BARBOSA COSTA, VICTOR DINIZ BORBOREMA DOS SANTOS, ÉRICKA JANINE DANTAS DA SILVEIRA, PETRUS PEREIRA GOMES, JOSÉ SANDRO PEREIRA DA SILVA, ADRIANO ROCHA GERMANO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO NORTE.*

After crossing the anatomical boundaries imposed by bone, dental infections can spread into fascial compartments, the odontogenic route being the main etiological pathway. However, some intraosseous pathologies can become secondarily infected, showing aggressive progression and therefore endangering the life of the individual. The presence of infection can often lead to misdiagnosis, and a good clinical examination, accompanied by imaging studies, is required. Considering the potential for imminent risk to the patient, the infection should be treated as soon as possible at the expense of the approach to the lesion. Here, we report 2 cases of facial infection in patients who were already showing signs of toxemia and were diagnosed with benign intraosseous odontogenic tumor, discussing the management adopted in each case.

AO-25 - LAUGIER–HUNZIKER SYNDROME: AN ORAL DIFFUSE PIGMENTED DISORDER NOT FREQUENTLY REPORTED. *ANDREIA BUFALINO, DARCY FERNANDES, TÚLIO MORANDIN FERRISSE, ELAINE MARIA SGAVIOLI MASSUCATO, CLÁUDIA MARIA NAVARRO, MIRIAN APARECIDA ONOFRE, ROSE MARA ORTEGA. FACULDADE DE ODONTOLOGIA DE ARARAQUARA – UNESP.*

Laugier–Hunziker syndrome (LHS) is an acquired disorder characterized by lenticular mucocutaneous pigmentation frequently accompanied by longitudinal melanonychia. A 56-year-old White male presented with a 3-year history of multiple, asymptomatic, oral melanotic macules, which had changed in number and color intensity in the last month. He denied smoking, and his medical history was unremarkable. Intraoral examination revealed multiple dark brown lenticular macules on the lips, labial mucosa, buccal mucosa (bilaterally), hard palate, and gingiva. Discrete longitudinal melanonychia was observed in the fingers. A biopsy revealed epithelial acanthosis, diffuse hyperpigmentation of basal cells, and melanin pigment

incontinence in the lamina propria with melanophages. Addison's disease and Peutz–Jeghers syndrome were excluded because of the absence of endocrine disorders and intestinal polyposis, leading to a diagnosis of LHS. Clinicians should be aware of this condition and consider it in the differential diagnosis of diffuse oral pigmentation. Due to its innocuous nature, LHS could be more common than reports suggest.

AO-26 - MULTIPLE MYELOMA: PRIMARY ORAL PRESENTATION OF 3 AGGRESSIVE CASES. *ÁGUIDA MARIA MENEZES AGUIAR MIRANDA, SIMONE MACEDO AMARAL, FÁBIO RAMOA PIRES, JULIANA DE NORONHA SANTOS NETTO, CYNTHIA COSTA QUEIROZ, JAQUELINE DE MORAES PEREIRA. UNIVERSIDADE ESTÁCIO DE SÁ/ASSOCIAÇÃO BRASILEIRA DE ODONTOLOGIA – RIO DE JANEIRO.*

Multiple myeloma is a plasma cell malignancy that can manifest primarily in the oral cavity. The aim of the present study is to report 3 cases of multiple myeloma primarily affecting the oral cavity, all with aggressive clinical presentations, in the following patients: a 58-year-old female presenting widespread involvement of the 4 quadrants of the jaws; a 50-year-old female presenting 2 large areas of bone destruction in the right posterior mandible and maxilla; and a 42-year-old male presenting a large mass destroying the left ramus of the mandible. All 3 cases were diagnosed through conventional histological analysis of oral biopsy specimens. It is important to consider multiple myeloma in the differential diagnosis of large aggressive oral masses, and it is essential to obtain adequate and representative oral specimens for correct diagnosis.

AO-27 - OSTEOBLASTOMA OF THE MANDIBLE: DIAGNOSIS AND TREATMENT. *JAMILE DE OLIVEIRA SÁ, LORENA CASTRO MARIANO, ANTÔNIO MÁRCIO TEIXEIRA MARCHIONNI, PATRÍCIA CASTRO VEIGA, GABRIELA BOTELHO MARTINS, SÍLVIA REGINA DE ALMEIDA REIS. ESCOLA BAHIANA DE MEDICINA E SAÚDE PÚBLICA.*

Osteoblastoma is a benign bone tumor that rarely occurs in facial bones. A 21-year-old female patient sought treatment at an oral and maxillofacial surgery service, complaining of facial swelling. Physical examination revealed bulging, as well as a reduction in the depth of the vestibule, in the left parasymphysis. Radiographs showed an osteolytic lesion in the left parasymphysis region, with expansion of the external cortex. An incisional biopsy was performed, and the histopathological findings suggested a diagnosis of osteoblastoma. The patient was submitted to marginal resection of the lesion and reconstruction with a free fibular graft. Six months after surgery, graft integration was observed and there were no signs of recurrence. The patient was then referred for rehabilitation with implant-supported prostheses. In this case, mandibular reconstruction improved the facial aesthetic defect and restored occlusion, as well as restoring masticatory function through the use of implant-supported prostheses.

AO-28 - LONG-TERM CONTROL OF PROLIFERATIVE VERRUCOUS LEUKOPLAKIA WITH FREE SKIN GRAFTS: A REPORT OF 2 CASES. *PAULO ANDRÉ GONÇALVES DE CARVALHO, ANDRÉ GUOLLO, DANIEL CAMPANHÃ, CLÓVIS ANTONIO LOPES PINTO, LUIZ PAULO KOWALSKI, FÁBIO DE ABREU ALVES. AC CAMARGO CANCER CENTER.*

Proliferative verrucous leukoplakia (PVL) is a subtype of oral leukoplakia with high risk of malignant transformation. Here, we describe the use of surgery with a free skin flap for the long-term control of 2 cases of PVL: a 77-year-old female with a 16-year history of multiple squamous cell carcinoma (SCC) who, in 2012, presented with white patches on the lower lip, which was treated with laser ablation of the left inferior gingiva, and an invasive SCC on the right border of the tongue, which was treated with partial glossectomy; and an 84-year-old female with a 6-year history of white patches and verruciform lesions on the left buccal mucosa, who, in 2010, presented with a verrucous carcinoma in the same area, which was treated through surgery with a free skin flap. In conclusion, PVL is an aggressive multifocal disease and remains resistant to treatment. However, extensive surgery in the malignant areas with a free skin flap provided satisfactory control of the lesions.

AO-29 - CENTRAL OSSIFYING FIBROMA WITH ANEURYSMAL BONE CYST-LIKE AREAS. *KARIN SÁ FERNANDES, DÉCIO DOS SANTOS PINTO JÚNIOR, HAROLDO ARID SOARES, MARINA HELENA CURY GALLOTTINI. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Aneurysmal bone cyst is a benign intraosseous lesion that can develop as a primary or secondary lesion associated with other bone diseases. A 29-year-old female presented with a 48-month history of asymptomatic mandibular cortical expansion. A panoramic radiograph showed a large, multilocular, radiolucent lesion extending anteroposteriorly from the mesial portion of tooth #45 to the distal root of tooth #47. An incisional biopsy was performed. Microscopic examination of the biopsy specimen revealed a highly cellular stroma composed of proliferating fibroblasts and osteoid material of varying sizes; many blood-filled cystic spaces of varying sizes; multinucleated giant cells; hemosiderin deposits; and many scattered trabeculae of immature bone, with single osteoblastic rimming and focal osteoclastic activity. The final diagnosis was central ossifying fibroma with aneurysmal bone cyst-like areas. Complete excision of the lesion, with wide margins, was performed, and no recurrence was observed during the follow-up period.

AO-30 - ORAL MANIFESTATION OF NK/T-CELL NON-HODGKIN LYMPHOMA MIMICKING MUCOSITIS: CHALLENGES IN DIAGNOSIS AND MANAGEMENT. *GRAZIELLA CHAGAS JAGUAR, ANA CLÁUDIA LUIZ, RODRIGO NASCIMENTO LOPES, WAGNER GOMES DA SILVA, THAIS BIANCA BRANDÃO. INSTITUTO DO CÂNCER DO ESTADO DE SÃO PAULO.*

Involvement of the oral cavity in extranodal NK/T-cell lymphoma, nasal type (ENKTCL-NT) is uncommon and often presents as a palatal perforation. A 37-year-old male with ENKTCL-NT accompanied by palatal perforation was referred to our dental oncology service for evaluation of oral lesions at 1 month after radiation and chemotherapy. Intraoral examination revealed painful ulcers and pseudomembranes on the upper lip, bilateral buccal mucosa, and lateral border of the tongue. The main working diagnosis was oral mucositis. Treatment with low-level laser therapy, together with topical anesthetics and anti-inflammatory agents, produced no response. An incisional tongue biopsy was performed, and the results were consistent with a diagnosis of NK/T-cell lymphoma involvement. The patient

presented a rapidly worsening clinical status and was admitted to the intensive care unit. This case underscores the aggressive behavior of this lymphoma and the atypical forms in which it can present.

AO-31 - AMELOBLASTIC FIBRODENTINOSARCOMA: A CASE REPORT. *ANA PAULA VERAS SOBRAL, LEORIK PEREIRA DA SILVA, JEFFERSON DA ROCHA TENÓRIO, GEORGE JOÃO FERREIRA DO NASCIMENTO, JOSÉ PAULO DA SILVA FILHO. FACULDADE DE ODONTOLOGIA DE PERNAMBUCO — UPE.*

Ameloblastic fibrodentinosarcoma belongs to a group of malignant tumors of odontogenic origin generically called odontogenic sarcomas. It is an extremely rare tumor, with few cases reported. A 19-year-old male presented with an asymptomatic enlargement of the left mandibular body and ramus. Physical examination revealed an extensive area of necrosis and the absence of teeth #36, #37, and #38. Analyzing a panoramic radiograph, we observed a unilocular radiolucent lesion with multiple radiopacity and impaction of tooth #38, suggesting a diagnosis of ameloblastic fibro-odontoma. Histopathological examination revealed a hypercellular ectomesenchymal component, cellular pleomorphism, hyperchromatic nuclei, and mitotic figures in areas of hypercellularity, as well as additional dentin-like material juxtaposed with sparse epithelial islands in an ameloblastic pattern, leading to a diagnosis of ameloblastic fibrodentinosarcoma. The patient was referred to the head and neck surgical service for treatment.

AO-32 - UNUSUAL ORAL NODULAR LESIONS IN PATIENTS WITH SJÖGREN'S SYNDROME. *ANA CAROLINA FRAGOSO MOTTA, JULIANA BARCHELLI PINHEIRO, CAMILA TIRAPELLI, CLAUDIA HELENA LOVATO DA SILVA, MARILENA CHINALI KOMESU, FLÁVIO CALIL PETEAN, JORGE ESQUICHE LEÓN. FACULDADE DE ODONTOLOGIA DE RIBEIRÃO PRETO — USP.*

Sjögren's syndrome (SS) is a chronic systemic autoimmune disorder affecting the lacrimal and salivary glands. It manifests as primary or secondary SS, the latter occurring in the context of another autoimmune disorder. In both cases, the dryness of the eyes and mouth affect patient quality of life. Late complications can include blindness, dental tissue destruction, oral candidiasis, and lymphoma. We report 2 cases of SS, each of which presented an unusual oral nodular lesion diagnosed as relapsed mucosa-associated lymphoid tissue lymphoma and mucocele, respectively. We emphasize the importance of having a dental health professional diagnose, treat, and manage oral lesions in patients with SS, because the oral manifestations of SS can compromise patient quality of life.

AO-33 - HISTOPATHOLOGICAL ASPECTS OF INTRAVASCULAR PAPILLARY ENDOTHELIAL HYPERPLASIA IN PRIMARY AND SECONDARY SUBTYPES. *GABRIELA SANCHEZ NAGATA, WELLINGTON HIDEAKI YANAGUIZAWA, AMANDA DA COSTA NARDIS, ROGÉRIO ALMEIDA DA SILVA, CAMILA DE BARROS GALLO, MARÍLIA TRIERVEILER MARTINS, DÉCIO DOS SANTOS PINTO JÚNIOR. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Intravascular papillary endothelial hyperplasia (IPEH) is a reactive lesion caused by abnormal proliferation of endothelial cells during thrombus formation. Here, we report 2 cases of IPEH, emphasizing the histopathological aspects. One patient was a 47-year-old male presenting with a 1-cm submucosal nodule of the lower lip, and the other was an 11-year-old female presenting with a 4-cm enlargement in the anterior portion of the vestibular fold. Both lesions were purplish with smooth surfaces. The working diagnosis was phlebolith or hemangioma. Histopathological examination showed dilated vessels with swollen proliferating endothelial cells surrounding papillary structures of connective tissue projecting toward the lumen. These proliferating cells were associated with an organized thrombus in the first patient and were adjacent to a hemangioma in the second. Inflammatory cells, cytologic atypia, and necrosis were all absent, which excluded other vascular lesions. After being diagnosed with IPEH, the first patient is free of recurrence. The second underwent embolization of the lesion, which is decreasing in size.

AO-34 - OSSIFYING FIBROMA OF THE MANDIBLE: A CASE REPORT. *MÁRIO RODRIGUES DE MELO FILHO, SABINA PENA BORGES PEGO, EDIMILSON MARTINS DE FREITAS, BRENO AMARAL ROCHA, LUIS ANTÔNIO NOGUEIRA DOS SANTOS, CLÁUDIO MARCELO CARDOSO, HERCÍLIO MARTELLI JÚNIOR. UNIVERSIDADE ESTADUAL DE MONTES CLAROS.*

Ossifying fibroma (OF) is classified as a benign bone neoplasm. Consisting of highly cellular fibrous tissue, OF is often considered a type of fibro-osseous lesion. It contains varying amounts of calcified tissue resembling bone, cementum, or both. A 42-year-old male patient presented with a 10-year history of swelling on the left side of the face. Clinical examination revealed a bony swelling and facial asymmetry. Intraorally, there was significant expansion of the buccal and lingual cortex. He presented no symptoms. The radiographic examination showed a well-defined, mixed radiolucent-radiopaque lesion. The diagnostic hypotheses were central OF, bone fibrous dysplasia, and odontogenic myxoma. An incisional biopsy was performed. The patient underwent surgery involving radical resection of the lesion and immediate reconstruction with a free rib graft, which was secured with a titanium plate.

AO-35 - REVERSE SMOKERS AND CHANGES IN ORAL MUCOSA. *ANA MARIA HOYOS CADAVID, GLORIA JANETH ALVAREZ-GÓMEZ, EFRAÍN ALVAREZ-MARTÍNEZ, FÁBIO DE ABREU ALVES. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Reverse smoking involves smoking a cigarette from the lit end. It is a dangerous practice that can cause cancer of the mouth. In areas where reverse smoking is popular, oral cancer rates are high. While the cigarette is being held by the teeth and lips, the seal provided by the lips allows the slow inhaling of the cigarette; the smoke is being expelled from the mouth, and ashes are expelled or swallowed. It is usually observed in warm zones, with a higher frequency in women. Here, we describe clinical and histological changes found in the oral mucosa of reverse smokers seeking treatment in the department of Sucre, Colombia. The clinical aspect of the oral mucosa in patients with the reverse smoking habit is different from that observed in conventional smokers. The sites most commonly affected are the tongue and palate.

AO-36 - ORAL PRESENTATION OF HISTOPLASMOSIS IN HIV PATIENT. *RODRIGO NASCIMENTO LOPES, GRAZIELLA CHAGAS JAGUAR, ANA CAROLINA PRADO RIBEIRO, WAGNER GOMES DA SILVA, ADRIELE FERREIRA GOUVEA, PABLO AGUSTIN VARGAS, THAIS BIANCA BRANDÃO. INSTITUTO DO CÂNCER DO ESTADO DE SÃO PAULO.*

Histoplasmosis is a systemic mycosis caused by the fungus *Histoplasma capsulatum*. Clinical features range from asymptomatic infections to disseminated severe forms that affect immunocompromised patients. Oral lesions are rare and are usually found in patients with advanced AIDS. Here, we report a case of disseminated histoplasmosis involving the oral cavity in a patient under treatment for HIV-associated large B-cell lymphoma. A 45-year-old female was referred for evaluation of oral mucositis after a cycle of chemotherapy. Clinical features included an extensive granulomatous lesion involving the hard palate, extending from the palatoglossal fold to the anterior maxilla, as well as involving the dorsum of the tongue. An incisional biopsy was performed, and the histopathological examination confirmed histoplasmosis. The patient was treated with amphotericin B. The rarity of such lesions represents a challenge in obtaining a correct diagnosis and could lead to inappropriate management of the condition.

POSTER PRESENTATIONS

PCC-001 - ADENOMATOID ODONTOGENIC TUMOR, EXTRAFOLLICULAR TYPE: A CASE REPORT. *MARÍLIA HEFFER CANTISANO, FELIPE SOUZA LIMA ALENCAR, TUANNY LIMA RANGEL, THIAGO MOREIRA PESSOA, GERALDO OLIVEIRA SILVA JÚNIOR, FÁBIO RAMOA PIRES, RUTH TRAMONTANI RAMOS. UNIVERSIDADE DO ESTADO DO RIO DE JANEIRO.*

Extrafollicular adenomatoid odontogenic tumors are less common than are those of the follicular type, which account for 75% of such lesions and involve the crown of an unerupted tooth. This epithelial neoplasm has a striking tendency to occur in the anterior region of the jaws and is largely limited to younger patients. A 15-year-old male patient was referred to a stomatology clinic with a radiolucency located between the roots of teeth #11 and #12, causing their divergence. A painless, expansive lesion was found, accompanied by negative results on tests of pulp sensitivity. The patient reported that he had noticed the lesion many years earlier. After incisional biopsy, the definitive diagnosis was adenomatoid odontogenic tumor. Total enucleation of the lesion was performed. Aggressive behavior has not been documented for adenomatoid odontogenic tumors. At 6 months of follow-up, the patient showed good healing and bone remodeling in the affected region.

PCC-002 - ADENOMATOID ODONTOGENIC TUMOR: AN UNUSUAL HISTOLOGICAL PRESENTATION WITH "PINDBORG-LIKE" DIFFERENTIATION. *CRISTINNE ANDRADE MELO, LUCAS EMANUEL TENÓRIO FERNANDES TELES, SARA JULIANA DE ABREU VASCONCELLOS, RAIMUNDO SILVA ROCHA, MARIA DE FÁTIMA BATISTA DE MELO, RICARDO LUIZ CAVALCANTI DE ALBUQUERQUE JÚNIOR. UNIVERSIDADE TIRADENTES.*

Adenomatoid odontogenic tumor (AOT) is a relatively rare odontogenic hamartoma derived from odontogenic epithelium. Although there have been many reports regarding the histological spectrum of AOT, only a few have highlighted unusual histological presentations. A 28-year-old female presented with a painless swelling in the maxillary anterior region. Radiological examinations revealed a well-defined unilocular lesion, with sclerotic margins, containing foci of slightly radiopaque material and promoting root divergence between teeth #22 and #23. An incisional biopsy showed spindle-shaped cells forming sheets, strands, and whorled masses, together with duct-like structures, throughout a scanty fibrous stroma. In some areas, sheets of polyhedral epithelial cells with prominent intercellular bridges, mild pleomorphism, and droplets of amyloid-like material were observed. The diagnosis was AOT with "Pindborg-like" differentiation. The occurrence of such differentiation in AOT seems to represent the caricatures of the enamel organ itself and is believed to be an altered phenotype of the tumor.

PCC-003 - CONSERVATIVE TREATMENT OF UNICYSTIC AMELOBLASTOMA: CASE REPORT. *EDUARDO DE ALMEIDA SOUTO MONTENEGRO, ANIBAL HENRIQUE BARBOSA LUNA, LUDMILA SILVA DE FIGUEIREDO, RODRIGO TOSCANO DE BRITO, KAROLINE GOMES DA SILVEIRA, DIÊGO DANTAS MOREIRA DE PAIVA, MARCOS ANTÔNIO FARIAS DE PAIVA. UNIVERSIDADE FEDERAL DA PARAÍBA.*

Ameloblastoma is a slow-growing, locally invasive, benign odontogenic epithelial tumor, often found in the posterior mandible. An 18-year-old Black female presented to our department of oral and maxillofacial surgery with swelling in the left jaw. She reported asymptomatic swelling of the lesion approximately 6 months earlier. During extraoral physical examination, asymmetry of the middle and lower third of the face was observed. Panoramic radiography showed an extensive unilocular radiolucent area including teeth #37 and #38. Aspiration biopsy rendered a dark liquid. Marsupialization of the lesion was performed, together with an incisional biopsy, and the material was submitted for histopathological analysis. The diagnosis was unicystic ameloblastoma. After 3 months, the lesion was removed and the 2 affected teeth were extracted. Two years after surgery, the patient was under periodic observation and there was complete recovery of local bone.

PCC-004 - AMELOBLASTIC FIBRODENTINOMA: A CASE REPORT. *RAFAEL BARRETO VIEIRA VALOIS, DANILO NASCIMENTO BARAUNA DA COSTA, JULIANA BATISTA MELO DA FONTE, LUCAS EMANUEL TENÓRIO FERNANDES TELES, EDVALDO DÓRIA ANJOS, MARIA DE FÁTIMA BATISTA DE MELO, RICARDO LUIZ CAVALCANTI DE ALBUQUERQUE JÚNIOR. UNIVERSIDADE TIRADENTES.*

Ameloblastic fibrodentinoma (AFD) is a rare odontogenic tumor composed of epithelial and mesenchymal odontogenic tissues, currently described as ameloblastic fibroma with dentin-like formation. A 13-year-old Black male presented with a painless swelling in the left posterior region of the mandible. Intraoral examination revealed an expansive lesion with a hard consistency, covered by normal mucosa. Panoramic radiography and computed tomography showed a well-circumscribed mixed osteolytic/osteoblastic lesion involving impacted teeth #36 and #38, as well as the absence of tooth #37. An excisional biopsy was performed, and histological analysis revealed ameloblastic epithelial strands and nests laid in a myxoid cell-rich stroma, together with extensive dentin-like tissue formation, resulting in a diagnosis of AFD. No recurrence was observed during 2 years of follow-up. Because AFD is a rare and controversial entity, it must be distinguished from other odontogenic lesions.

PCC-005 - AMELOBLASTOMA IN THE MAXILLA: A RARE AND DIFFICULT CASE. *CAROLINE ZIMMERMANN, MARIA INÊS MEURER, ALESSANDRA RODRIGUES DE CAMARGO, ETIENE DE ANDRADE MUNHOZ, FILIPE MODOLO SIQUEIRA, LILIANE JANETE GRANDO. UNIVERSIDADE FEDERAL DE SANTA CATARINA.*

Solid ameloblastoma (SA) is a locally invasive odontogenic tumor, usually found in the posterior jaw of adults. A 67-year-old male presented with an 18-month history of large growth in the maxilla and a diagnosis of prosthetic trauma. He also reported left nasal obstruction. Oral examination revealed a 3-cm nodular lesion in the posterior area of the upper left buccal sulcus, with an irregular surface and fibrous consistency, ulcerated by trauma. Radiography showed complete opacification, as well as destruction of the floor and posterior wall, of the left maxillary sinus. An incisional biopsy was performed, and the histopathological diagnosis was consistent with SA. Computed tomography showed obliteration of the maxillary sinus and ethmoid infundibulum, extending into the nasal cavity. Because SA is uncommon at this site, an additional biopsy was performed, and the results confirmed the diagnosis. The patient refused treatment, because of the probability of major orofacial sequelae. He is currently being monitored and the prognosis is poor.

PCC-006 - AN UNUSUAL PRESENTATION OF KERATOCYSTIC ODONTOGENIC TUMOR IN THE ANTERIOR MAXILLA. *DÉBORA LIMA PEREIRA, ROGÉRIO DE ANDRADE ELIAS, ALAN ROGER DOS SANTOS SILVA, PABLO AGUSTIN VARGAS, MÁRCIO AJUDARTE LOPES. FACULDADE DE ODONTOLOGIA DE PIRACICABA — UNICAMP.*

Keratocystic odontogenic tumor (KOT) is a potentially aggressive tumor characterized by keratinized epithelium, being found most commonly in the posterior mandible during the second and third decades of life. A 31-year-old male was referred for evaluation of an anterior maxillary lesion. The patient reported the occurrence of local trauma 10 years earlier, which had led to endodontic treatment of the anterior superior teeth. Because there was no remission, his dentist performed surgical exploration 1 year earlier. Intraoral examination revealed a fistula draining yellowish material. Panoramic radiography and computed tomography showed a well-defined mass in the anterior maxilla displacing the central incisor teeth, similar to what is seen in cases of nasopalatine duct cyst. Surgical curettage was performed, and the histopathological analysis showed connective tissue lined with a keratinized stratified squamous epithelium, supporting a diagnosis of KOT. The patient recovered well and is still being followed-up. The precise diagnosis, particularly in cases with an unusual presentation, is very important to determining the appropriate management strategy.

PCC-007 - CENTRAL ODONTOGENIC FIBROMA: A CASE REPORT. *EVANDRO FARIAS DE ALENCAR JUNIOR, LUIZ ARTHUR BARBOSA DA SILVA, ANTONIO DIONÍZIO DE ALBUQUERQUE NETO, POLYANNA ATAIDE SOARES, FERNANDA DA SILVA BARROS, JOSÉ DE AMORIM LISBOA NETO, VANIO SANTOS COSTA. UNIVERSIDADE FEDERAL DE ALAGOAS.*

Central odontogenic fibroma is a rare benign neoplasm. According to the literature, the female:male ratio is 2.2:1. Odontogenic fibroma of the jaw is more common in the anterior maxilla and posterior mandible. Currently, the term odontogenic fibroma is applied to 2 histological types: epithelium-poor (simple type) and epithelium-rich (complex type; World Health Organization classification). Because of its benign nature, odontogenic fibroma has a low recurrence rate and can be treated by curettage. A 77-year-old female presented with unilateral (right-sided) pain and swelling of the face, together with an asymmetric partially edentulous mandibular ridge. Panoramic radiography showed a radiolucent unilocular lesion extending from the symphysis to the right mandibular body. Histological examination showed a collagenous stroma with dispersed fibroblasts and scarce strands of odontogenic epithelium. Therefore, the diagnosis was epithelial-poor odontogenic fibroma.

PCC-008 - CALCIFYING CYSTIC ODONTOGENIC TUMOR: CLINICAL CASE REPORT AND LITERATURE REVIEW. *JÉSSICA CAROLINE AFONSO FERREIRA, FABRÍCIO SOUZA LANDIM, KALLENA SELYS QUINTO NUNES, OZAWA BRASIL JUNIOR, BELMIRO CAVALCANTI DO EGITO VASCONCELOS, EMANUEL SÁVIO DE SOUZA ANDRADE. FACULDADE DE ODONTOLOGIA DE PERNAMBUCO — UPE.*

Calcifying cystic odontogenic tumor (CCOT) is a rare lesion derived from odontogenic epithelium that accounts for 1—2% of all odontogenic tumors. It affects the maxilla and mandible in equal proportions; has a predilection for the anterior maxilla; and can exhibit signs and symptoms that mimic other lesions of gnathic bones. A 37-year-old Black male presented to our department of oral and maxillofacial surgery for evaluation of a $5 \times 4 \times 3$ cm lesion in the anterior mandible, together with cortical bone resorption. The patient reported intermittent pain. Histopathological analysis of biopsy material confirmed the suspected diagnosis of CCOT. Surgical excision of the lesion was performed. In this report, we discuss the clinicopathological and imaging features, as well as the surgical treatment, of CCOT.

PCC-009 - KERATOCYSTIC ODONTOGENIC TUMOR IN THE INFRAORBITAL REGION: CASE REPORT. *ANDERSON MAIKON DE SOUZA SANTOS, GUSTAVO JOSÉ DE LUNA CAMPOS, MÁRIO CÉSAR FURTADO DA COSTA, IRWIN GIBSON SILVA GOMES, CASSIANO FRANCISCO WEEGE NONAKA, POLLIANNA MUNIZ ALVES, GUSTAVO PINA GODOY. UNIVERSIDADE ESTADUAL DA PARAÍBA.*

Keratocystic odontogenic tumor (KOT) is a benign but locally aggressive tumor originating from the cellular remnants of dental lamina. It is frequently located in the posterior mandible, being rare in the anterior maxilla. A 17-year-old female presented to our department of oral and maxillofacial surgery with painful volume increase in the right infraorbital region. Computed tomography showed an image consistent with a lesion surrounding the crown of tooth #13, in the infraorbital region. The tooth was extracted, and the lesion was completely removed by local surgical excision. Histopathological examination of the lesion resulted in a diagnosis of KOT. The patient progressed well and without recurrence. This particular topography is rare among cases of KOT.

PCC-010 - MALIGNANT ODONTOGENIC TUMOR: A GREAT CHALLENGE TO THE ORAL PATHOLOGIST. *ALESSANDRO MENNA ALVES, FELIPE NÖR, KELLY BIENK DIAS, FERNANDA VISIOLI, MANOELA DOMINGUES MARTINS. UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL.*

Malignant odontogenic tumors are extremely rare lesions that can arise as new lesions or through malignant transformation of benign tumors. These lesions are a major diagnostic challenge

due to their complex histopathological features. A 60-year-old female presented with a right-sided facial swelling. Radiography revealed a multiloculated, radiolucent lesion with a "honeycomb" or "soap bubble" aspect, resembling a benign odontogenic lesion (e.g., ameloblastoma). The histopathological examination revealed a solid sheet of neoplastic cells in a plexiform pattern, surrounded by basophilic material, exhibiting cellular pleomorphism, evident nucleoli, altered nucleus/cytoplasm ratio, some mitotic figures, and rare clear cells. The Ki-67 staining was positive in $>$ 50% of the tumor cells. Even with a partial biopsy, the immunohistochemical and histopathological findings led to a diagnosis of malignancy, underscoring the importance of ancillary tests and careful histological evaluation in determining the appropriate treatment.

PCC-011 - MANAGEMENT OF AN EXTENSIVE MANDIBULAR RADICULAR CYST BY COMBINED CONSERVATIVE SURGERY AND ENDODONTIC THERAPY. *PATRICIA KOCHANY FELIPAK, DAIANE APARECIDA DA SILVA, CAMILA PINHEIRO FURQUIM, LAURA GREIN CAVALCANTI, CLETO MARIOSVALDO PIAZZETTA, JOSÉ MIGUEL AMENÁBAR CÉSPEDES, CASSIUS CARVALHO TORRES-PEREIRA. UNIVERSIDADE FEDERAL DO PARANÁ.*

Radicular cysts are the most common type of cyst affecting the maxillofacial region. A 31-year-old female presented with a purplish swelling in the anterior mandible, as seen by intraoral examination. Panoramic radiography revealed a single, extensive, well-defined periapical radiolucency involving the anterior teeth. Thermal pulp testing and a percussion test were performed, as were puncture and incisional biopsy. Histopathological analysis confirmed the working diagnosis of radicular cyst. Because of the size of the lesion, the treatment plan involved a combination of conventional endodontic treatment and conservative surgery. During surgery under local anesthesia, a polyethylene spool was inserted for cyst decompression to reduce the cystic cavity, preserving anatomical structures and promoting bone repair. The case reported here was managed successfully by endodontic therapy followed by surgery. Decompression was effective in reducing the cystic lesion and increasing bone density.

PCC-012 - MARSUPIALIZATION AS A CONSERVATIVE APPROACH IN THE TREATMENT OF INFLAMMATORY DENTIGEROUS CYST: REPORT OF 2 CASES. *FRANCISCO SAMUEL RODRIGUES CARVALHO, ASSIS FILIPE MEDEIROS ALBUQUERQUE, JOSÉ RÔMULO MEDEIROS, ANA PAULA NEGREIROS NUNES ALVES, EDUARDO COSTA STUDART SOARES, FÁBIO WILDSON GURGEL COSTA. UNIVERSIDADE FEDERAL DO CEARÁ.*

Dentigerous cyst in children has been reported as being of low incidence among oral lesions. Inflammatory dentigerous cyst develops in an immature permanent tooth as a result of spreading inflammation from an overlying non-vital primary tooth. Here, we describe 2 cases of inflammatory dentigerous cyst occurring in the transitional dentition, both of which were managed conservatively. The first case was in a 9-year-old male complaining of swelling in the right posterior mandible, and the second was in a 10-year-old female presenting with swelling in the left posterior mandible. In both cases, the lesions were associated with deciduous teeth affected by caries processes and the final diagnosis was inflammatory dentigerous cyst. The clinical approach was marsupialization without a second surgical intervention. Postoperatively, normal bone healing was observed in both patients. The follow-up periods were 8 and 2 years in the first and second case, respectively. These cases highlight the effectiveness of marsupialization in young patients.

PCC-013 - ODONTOGENIC MYXOMA IN MANDIBULAR SYMPHYSIS: A CASE REPORT. *DAYSE HANNA MAIA OLIVEIRA, RAFAELA SIMÃO DE ABANTES, JULIERME FERREIRA ROCHA, PEDRO PAULO DE ANDRADE SANTOS, JOSÉ WILSON NOLETO RAMOS JÚNIOR. UNIVERSIDADE FEDERAL DE CAMPINA GRANDE.*

Myxomas are tumors originating from odontogenic ectomesenchyme, affecting adults aged 25−35 years, without sex predilection, and usually occurring in the mandible. A myxoma has no fibrous capsule, growing through the trabecular bone. Larger lesions can cause asymptomatic expansion of the bone. Radiographically, odontogenic myxoma presents as a unilocular or multilocular radiolucency, with well-defined or irregular margins, with trabeculae arranged at right angles, giving a "tennis racket" appearance. The recommended treatment is bone resection with safety margins to minimize the risk of recurrence. Here, we report the case of a 28-year-old female presenting with an odontogenic myxoma involving the mandibular symphysis, which was successfully treated by marginal resection. The patient was followed-up for 2 years. No clinical or radiographic signs of recurrence were observed.

PCC-014 - BASAL CELL CARCINOMA ON THE UPPER LIP: CASE REPORT. *LAÍS BRANDÃO NOBRE, KARINE CÁSSIA BATISTA LÚCIO E SILVA, ANNA CAROLINA OMENA VASCONCELLOS LE CAMPION, ELISANDRA SILVA DO CARMO, ANA PAULA FERNANDES BARBOSA, SONIA MARIA SOARES FERREIRA, STEFÂNIA JERONIMO FERREIRA. CENTRO UNIVERSITÁRIO CESMAC.*

Basal cell carcinoma (BCC) is the most common type of malignancy, resulting from chronic exposure to solar radiation. It often affects the skin of the face, including the lower lip. A 47-year-old male, who was an ex-smoker and ex-alcoholic, sought treatment at our stomatology clinic with an oral lesion that had been evolving for 1 year. Clinical examination revealed an erythematous ulcerative lesion, with necrotic areas and hardened edges, on the upper lip. The working diagnosis was BCC. An incisional biopsy was performed, and the histopathological analysis confirmed the diagnosis. The patient underwent surgical treatment. No significant changes have been seen during close follow-up. This case emphasizes the good prognosis due to the low aggressiveness of BCC and highlights the fact that, although this lesion is rare in the region of the upper lip, dentists should be aware of the possibility of BCC in the perioral region.

PCC-015 - PRIMARY INTRAOSSEOUS SQUAMOUS CELL CARCINOMA ARISING FROM A KERATOCYSTIC ODONTOGENIC TUMOR: CASE REPORT. *MAURÍCIO DA ROCHA DOURADO, MARISOL MARTÍNEZ MARTÍNEZ, WILSON DELGADO AZAÑERO, LUCIANA YAMAMOTO DE ALMEIDA, FERNANDA DOS SANTOS MOREIRA, CAMILA BORGES FERREIRA GOMES, OSLEI PAES DE ALMEIDA. FACULDADE DE ODONTOLOGIA DE PIRACICABA − UNICAMP.*

Primary intraosseous squamous cell carcinoma (PISCC) is a rare malignant tumor originating from remnants of odontogenic epithelium. It is currently thought that some cases of PISCC are preceded by benign tumors or odontogenic cysts. The diagnosis of PISCC can be difficult, especially when it causes destruction of the cortical bone, can be confused with a true carcinoma of the soft tissues. Therefore, we present a case of PISCC that was diagnosed on the basis of clinical and histopathological data. A 37-year-old female, previously diagnosed with a keratocystic odontogenic tumor (KOT), was referred for evaluation of a slow-growing swelling in the right genial region. Two biopsies were performed. The histological aspects of the first biopsy were diagnostic of KOT, whereas those of the second indicated squamous cell carcinoma. Immunohistochemical reactions to cytokeratins, Ki-67, p53, bcl2, and COX-2 showed the consecutive malignant transformation of KOT into PISCC.

PCC-016 - SPINDLE CELL CARCINOMA IN A YOUNG MAN: A CASE REPORT OF A RARE ENTITY. *ROSEANE CARVALHO VASCONCELOS, LUCIANA ELOISA DA SILVA CASTRO NÓBREGA, VIVIANE ALVES DE OLIVEIRA MAIA, EDILMAR DE MOURA SANTOS, VICTOR DINIZ BORBOREMA DOS SANTOS, ADRIANO ROCHA GERMANO, ANTÔNIO DE LISBOA LOPES COSTA. UNIVERSIDADE FEDERAL DO RIO GRANDE DO NORTE.*

Spindle cell carcinoma (SpCC), also known as sarcomatoid carcinoma, is a rare biphasic malignant neoplasm that occurs mainly in the upper aerodigestive tract. An aggressive variant of squamous cell carcinoma, SpCC has spindled or pleomorphic tumor cells, which simulate a sarcoma but are of epithelial origin. It often recurs and metastasizes, underscoring the importance of diagnosing it correctly. A 21-year-old male presented with an irregular painless mass in the anterior mandible. Panoramic radiography and computed tomography showed destructive osteolytic lesion of the mandibular bone. Histopathological analysis revealed pleomorphic spindle cells, with atypical mitoses, arranged in an irregular fascicular pattern, together with small areas of squamous cell carcinoma. The immunohistochemical analysis showed positivity for 34βE12, AE1/AE3, vimentin, and Ki-67. The patient underwent chemotherapy and radiotherapy, which, however, were ineffective. The lesion was deemed inoperable. Currently, the patient has been followed-up via palliative treatment.

PCC-017 - SQUAMOUS CELL CARCINOMA OF THE MAXILLARY SINUS: A CASE REPORT. *LUCIANA SILVA REGUEIRA, BETÂNIA FERREIRA LIMA, RENATA LAÍS XAVIER SANTOS, MARIA GABRIELA LIMA BARBOSA, TERESA PAULA DE LIMA GUSMÃO, FABIANA MOURA DA MOTTA SILVEIRA. INSTITUTO DE MEDICINA INTEGRAL PROFESSOR FERNANDO FIGUEIRA.*

Squamous cell carcinoma of the head and neck has a high incidence and mortality, and is the sixth most common cancer worldwide. A 60-year-old male, who was a smoker and alcoholic, admitted to an oncology ward with convulsive status secondary to a neoplasm in the maxillary sinus. Computed tomography revealed perilesional edema, without bleeding, at the skull base. Clinical examination revealed a normochromic, asymptomatic swelling in the palate, together with nasal bleeding. Palatal biopsy revealed invasive, non-keratinized, basaloid variant squamous cell carcinoma that was poorly differentiated and contained some areas of necrosis. The patient is being treated with radiotherapy (at a total dose of 70 Gy) and chemotherapy.

PCC-018 - VERRUCOUS CARCINOMA: A CASE REPORT. *LAÍS BRANDÃO NOBRE, ANNA CAROLINA OMENA VASCONCELLOS LE CAMPION, ELISANDRA SILVA DO CARMO, KARINE CÁSSIA BATISTA LÚCIO E SILVA, THAYNÁ MELO DE LIMA MORAIS, CAMILA MARIA BEDER RIBEIRO, SONIA MARIA SOARES FERREIRA. CENTRO UNIVERSITÁRIO CESMAC.*

Verrucous carcinoma (VC) is a rare, well-differentiated form of squamous cell carcinoma, with specific clinical and histological features, such as slow-growth with minimal metastatic potential. A 58-year-old White male patient presented with a chief complaint of a growth associated with bleeding and pain at the site where a tooth had been extracted 5 months earlier. Clinical examination revealed a large. ulcerated, red and white speckled exophytic lesion with a granulomatous surface, located on the alveolar mucosa of the left mandible in the area of the second premolar and extending to the retromolar region. The clinical hypothesis was squamous cell carcinoma. An incisional biopsy was performed, and the anatomopathological examination showed thickened club-shaped papillae and blunt stromal invaginations of well-differentiated squamous epithelium with marked keratinization, consistent with VC. Due to the size of tumor, the patient was treated only with radiotherapy and palliative care.

PCC-019 - WHITE SPONGE NEVUS RESTRICTED TO THE VENTRAL SURFACE OF THE TONGUE: CASE STUDY. *ISABELLE SARMENTO ROSA VIEIRA, SONIA MARIA SOARES FERREIRA, JOSÉ DE AMORIM LISBOA NETO, FERNANDA BRAGA PEIXOTO, AUREA VALÉRIA DE MELO FRANCO, KATHARINA FERNANDES JUCÁ, CAMILA MARIA BEDER RIBEIRO. CENTRO UNIVERSITÁRIO CESMAC.*

White sponge nevus (WSN) is a rare benign autosomal dominant disorder that affects various types of mucosa (oral, genital, laryngeal, and esophageal), tends to appear at early ages, and is more prevalent in women than in men (3:1). The disorder is characterized by diffuse, white corrugated plaques. A 24-year-old White female presented with an 11-year history of diffuse bilateral white plaques on the ventral surface of the tongue. These plaques were not removable with scraping but showed desquamation of the surface. A diagnosis of WSN was suggested, and an incisional biopsy was performed. Histological sections showed hyperparakeratosis and acanthosis in mucosal fragments. Keratinocytes in the suprabasal layers showed vacuolated and perinuclear eosinophilic condensation. The case highlights the importance of a diagnosis of WSN at a restricted site on the ventral surface of the tongue.

PCC-020 - SIMULTANEOUS PRIMARY SQUAMOUS CELL CARCINOMAS OF THE UPPER LIP: A CASE REPORT. *JULIANA JASPER, MARIA NOEL MARZANO RODRIGUES PETRUZZI, LUISA CIDALIA GALLO DE ALMEIDA, KAREN CHERUBINI, FERNANDA GONÇALVES SALUM, LILIANE SOARES YURGEL, MARIA ANTONIA ZANCANARO DE FIGUEIREDO. PONTIFÍCIA UNIVERSIDADE CATÓLICA DO RIO GRANDE DO SUL.*

In 90% of cases, malignant neoplasms of the lip are squamous cell carcinomas (SCC). Despite the low prevalence of lesions arising on the upper lip, tumors involving this anatomical site usually proliferate rapidly, are histologically more undifferentiated and metastasize earlier than do those affecting the lower lip. A 74-year-old female presented with 2 necrotic, ulcerated areas on the upper lip, which had appeared 4 months earlier and had developed synchronously. The patient was a farm worker and a regular smoker. The medical history was noncontributory, and the results of initial examinations were normal. The differential diagnosis included chronic ulcer, paracoccidioidomycosis, basal cell carcinoma, and SCC. Incisional biopsies were performed, and the histopathological findings were consistent with a diagnosis of SCC for both sites. The patient underwent surgical treatment and remains tumor-free at this writing. Dentists should be aware of the diagnostic challenges posed by simultaneous primary tumors of the upper lip.

PCC-021 - DENTINOGENESIS IMPERFECTA: A CASE REPORT. *FERNANDA DA SILVA BARROS, POLYANNA ATAÍDE SOARES, ANTONIO DIONÍZIO DE ALBUQUERQUE NETO, EVANDRO FARIAS DE ALENCAR JUNIOR, JOSÉ HENRIQUE ALVES SARMENTO, LUIZ ARTHUR BARBOSA SILVA, JOSÉ DE AMORIM LISBOA NETO. UNIVERSIDADE FEDERAL DE ALAGOAS.*

Dentinogenesis imperfecta (DI) belongs to a group of developmental disorders that are inherited in an autosomal dominant pattern. Dental alterations caused by DI are due to irregular, demineralized dentin that obliterates the pulp chambers and root canals. In individuals with DI, the enamel structure is normal. However, the teeth of such individuals are opalescent and less resistant to attrition. Dental crown fractures are also more common among such individuals. These alterations can be isolated or accompanied by osteogenesis imperfecta. A 16-year-old male had chief complaints of change in tooth color and excessive tooth wear. His mother and 2 brothers presented the same oral alterations. Oral examination showed grayish blue teeth, incisors with normal enamel, and softened exposed dentin. The patient reported rapid attrition of the teeth, and no bone changes were detected. Therefore, a diagnosis of DI was suggested, and the patient was treated accordingly.

PCC-022 - LYMPHOEPITHELIAL CYST ON THE VENTRAL SURFACE OF THE TONGUE: A CASE REPORT. *ISABELLE DA ROCHA CÂMARA, EALBER LUNA DE MACÊDO, KARUZA MARIA ALVES PEREIRA, ANA PAULA NEGREIROS NUNES ALVES, ALEXANDRE SIMÕES NOGUEIRA, FÁBIO WILDSON GURGEL COSTA. UNIVERSIDADE FEDERAL DO CEARÁ.*

Lymphoepithelial cyst is rare in the oral cavity. When occurring in the oral cavity, it typically affects the floor of the mouth. A 53-year-old female was referred to our facility for prosthetic rehabilitation. The intraoral examination revealed a nodular, sessile 0.5-cm lesion with a smooth surface, located on the ventral surface of the tongue. An excisional biopsy was performed, and the histopathological analysis revealed a cystic cavity containing desquamated epithelial cells and lined with a predominantly parakeratinized stratified squamous epithelium. The fibrous capsule showed a dense lymphocytic infiltrate, without germinal centers, consistent with oral lymphoepithelial cyst. No recurrence was observed at 12 months of follow-up. We highlight the importance of sending fragments of oral tissue for histopathological analysis due to the possibility of such rare lesions.

PCC-023 - TRAUMATIC BONE CYST: CASE REPORT. *PRISCILA SANTOS DE CARVALHO, AYLIME KAMILLE COSTA MENEZES, FABIANA MARIA ALMEIDA SADY, ANTONIO VARELA CANCIO, JENER GONÇALVES DE FARIAS, DEYLA DUARTE CARNEIRO VILELA, JULIANA ANDRADE CARDOSO. UNIÃO METROPOLITANA DE EDUCAÇÃO E CULTURA.*

The World Health Organization currently classifies traumatic bone cyst as a bone-related lesion. Although the pathology of traumatic bone cyst remains unclear, the trauma-bleeding theory is the further defended by pathologists. A 16-year-old female presented with an asymptomatic lesion as an incidental radiographic finding. Radiography revealed a well-defined, unilocular radiolucency in the anterior mandible. In view of the clinical and radiographic findings, the diagnostic hypothesis was traumatic bone cyst. To improve access to the lesion, puncture and aspiration were performed. The intraoperative findings were consistent with traumatic bone cyst, because there was only an empty cavity, with no fibrous capsule. A few months after the surgical intervention, panoramic radiography showed new bone formation in response to bleeding provoked during the surgery.

PCC-024 - NONSYNDROMIC OLIGODONTIA: A CASE REPORT. *BRUNO RAFAEL CRUZ DA SILVA, DEMÓSTENES BARBOSA DE ARAÚJO, BERENICE MENDES MACHADO, DENISE NÓBREGA DINIZ, ALCIONE BARBOSA LIRA DE FARIAS, LUCIANA DE BARROS CORREIA FONTES, ANA ISABELLA ARRUDA MEIRA RIBEIRO. UNIVERSIDADE ESTADUAL DA PARAÍBA.*

Tooth agenesis, also known as congenital tooth absence, is characterized by a reduced number of teeth and has a multifactorial etiology, including genetic predisposition, external issues, radiation exposure, and syndromes. A 16-year-old, dark-skinned male searched for dental care complaining of difficulties in chewing; had missing teeth, dry skin, and anhidrosis. Physical examination revealed a convex facial profile; dry lips; ulceration of the buccal mucosa; the presence of teeth #17, #13, #11, #21, #23, #26, #37, #31, and #47 only; dens in dente; macrodontia; resorbed alveolar ridge; and reduced occlusal vertical dimension, resulting in functional and psychosocial impairment. Genetic tests revealed no associated syndromes. Overlay plates were installed for mandibular-maxillary rehabilitation. We emphasize the importance of multidisciplinary medical and dental care, in order to achieve greater diagnostic accuracy and establish an appropriate treatment plan to restore the homeostasis of the stomatognathic system.

PCC-025 - MANDIBULAR METASTASIS OF HEPATOCELLULAR CARCINOMA: A CASE REPORT. *MARCELO MARCUCCI, CLÁUDIA PERES TRINDADE FRAGA, ROSANA MASTRO FRANCISCO, DANIEL HACOMAR DOS SANTOS, DANTE SIMIONATO NETTO, ANDERSON COSTA LINO COSTA. SERVIÇO DE ESTOMATOLOGIA DO HOSPITAL HELIÓPOLIS – SÃO PAULO.*

Metastatic lesions in the mandible are uncommon findings and are usually due to disseminated primary disease. Tumors of the lung, breast, kidney, and prostate are typically implicated in such lesions. A 62-year-old male presented with a progressive

volume increase in the molar region after extraction of teeth at the site. He reported being a carrier of hepatitis C and hepatocellular carcinoma, although the diagnosis of the latter was still in the staging process. Physical examination revealed a submucosal tumor with a fibroelastic consistency. Computed tomography showed extensive osteolytic lesion with cortical disruption of the jaw. Histopathology showed atypical epithelial cells arranged in a solid block, with positive immunostaining for carcinoembryonic antigen, indicating a diagnosis of metastatic hepatocellular carcinoma in the mandible. With worldwide incidences of 1.4 million new cases/year, metastasis of hepatocellular carcinoma to the mandible is quite rare, with only approximately 75 reports in the literature.

PCC-026 - ORAL MALIGNANT MELANOMA: A CASE REPORT. *MARIANA ARAÚJO MACIEL, DENNYS RAMON FERNANDES, MÁRIO ROGÉRIO LIMA MOTA, FABRÍCIO BITU SOUSA, RICARDO LINCOLN PINTO GONDIM, PATTY SALDANHA, ANA PAULA NEGREIROS NUNES ALVES. UNIVERSIDADE FEDERAL DO CEARÁ.*

Oral malignant melanoma accounts for only 0.5% of all malignant lesions in the oral cavity. A 47-year-old female presented with a 1.5-cm blackened lesion in the hard palate, which had been progressing for 8 months at the first evaluation, in 2006. An incisional biopsy performed at that time revealed a squamous, hyperplastic intraepithelial lesion. In 2009, the patient presented an increase of the lesion, a new incisional biopsy was performed, and the classification was racial melanosis. In 2012, she again sought treatment, presenting with 2 lesions: 1 on the hard and soft palate, measuring 7 $\times$ 4.5 cm; and another on the maxillary alveolar ridge, measuring 7 cm. Another incisional biopsy was performed, which resulted in a diagnosis of invasive oral melanoma with an "in-situ" component. In cases of pigmented lesions, which have a high potential for malignancy, there is a need for rigorous clinical monitoring and correct surgical execution for histopathological examination, so that such lesions can be diagnosed in the early stages.

PCC-027 - PROLIFERATIVE VERRUCOUS LEUKOPLAKIA: FOLLOW-UP OF 3 YEARS WITH MALIGNANT TRANSFORMATION. *GABRIELA BOTELHO MARTINS, LARA CORREIA PEREIRA, ALENA RIBEIRO ALVES PEIXOTO MEDRADO, ELISÂNGELA DE JESUS CAMPOS, SÍLVIA REGINA DE ALMEIDA REIS. UNIVERSIDADE FEDERAL DA BAHIA.*

Proliferative verrucous leukoplakia (PVL) is a long-term progressive condition that develops as a slow-growing white plaque, occasionally progressing to verrucous carcinoma or oral squamous cell carcinoma (OSCC). A 62-year-old female was referred for clinical evaluation of a homogenous white plaque on the tongue and a lesion on the upper vestibular gingiva. An incisional biopsy was performed, and the analysis revealed mild epithelial dysplasia. After 8 and 14 months of follow-up, respectively, a new lesion appeared, on the lower alveolar ridge, and new biopsies showed mild-to-moderate dysplasia. A clinical diagnosis of PVL was established, because the lesions showed verrucous aspects and had spread. In 2013, another new lesion appeared, on the buccal mucosa, prompting a more detailed evaluation. Analysis of biopsy samples revealed OSCC in the lesion on the tongue. In patients with PVL, early diagnosis and follow-up are important, because of the risk of malignant transformation.

PCC-028 - CO-INFECTION OF CYTOMEGALOVIRUS IN ORAL KAPOSI'S SARCOMA: A CASE REPORT. *NAÍZA MENEZES MEDEIROS ABRAHIM, SILVIA CRISTINA OLIVEIRA BRANDÃO, TATIANA NAYARA LIBÓRIO KIMURA, ANDRÉ FELIPE MOURÃO, ANDRÉ LUIZ CARVALHO BARREIROS, LUCILEIDE CASTRO DE OLIVEIRA, JECONIAS CÂMARA. UNIVERSIDADE FEDERAL DO AMAZONAS.*

Kaposi's sarcoma is a malignant vascular neoplasm strongly associated with human herpesvirus 8 (HHV-8) infection. A 35-year-old HIV-infected male, who was a drug user, was referred to a dental clinic for evaluation of a lesion on the palate and multiple cutaneous nodules. Intraoral examination revealed exophytic and ulcerated violaceous lesion on the left side of the hard palate. The working diagnosis was oral neoplasm, and an incisional biopsy was performed. Histopathological analysis revealed a lesion of vascular origin, showing fibrovascular proliferation and containing spindle cells, with slit-like vascular spaces. In other areas, large cells with "owl's eye" inclusion bodies—consistent with cytomegalovirus (CMV) infection—were observed near the blood vessel walls. A diagnosis of Kaposi's sarcoma with concomitant CMV infection was established. The immunohistochemistry was positive for anti-HHV-8 antibodies. The patient was referred to an oncology referral center for treatment.

PCC-029 - CUTANEOUS T-CELL LYMPHOMA: CASE REPORT. *THAMIRES SILVA SOUZA, RAFAELA MAIA CARDOSO ALMENDRA, HELOÍSA LAÍS ROSÁRIO DOS SANTOS, INÁCIO AGUIAR, PATRÍCIA LEITE RIBEIRO LAMBERTI, ANTONIO FERNANDO PEREIRA FALCÃO, VIVIANE ALMEIDA SARMENTO. UNIVERSIDADE FEDERAL DA BAHIA.*

Cutaneous T-cell lymphoma comprises a heterogeneous group of lymphoproliferative disorders defined by the primary expansion of malignant T lymphocytes to the skin. This disease has 2 main manifestations: mycosis fungoides and Sézary syndrome. A 25-year-old female was admitted to the hospital with painless extraoral swelling. She had been referred from another hospital with a diagnosis of spongiotic dermatitis, which had been treated with amphotericin, without resolution. Computed tomography showed an expansive, infiltrative lesion with irregular borders, located on the upper lip and extending to the nasolabial fold. Histological and immunohistochemical findings indicated a diagnosis of cutaneous T-cell lymphoma. The patient underwent chemotherapy (CHOEP regimen) but died after the first 2 cycles.

PCC-030 - AGGRESSIVE VARIANT OF AN ADENOID CYSTIC CARCINOMA IN THE PALATAL REGION. *WELLINGTON HIDEAKI YANAGUIZAWA, ANA PAULA CANDIDO DOS SANTOS, ÉRICA FERNANDA PATRICIO DA SILVA, ANA CLAUDIA LUIZ, BRUNO TAVARES SEDASSARI, MARÍLIA TRIERVEILER MARTINS, CAMILA DE BARROS GALLO. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Adenoid cystic carcinoma (ACC) is the second most common salivary gland malignancy. A 65-year-old White female presented to our department of stomatology complaining of a 2-month history of a painful swelling in the palate. Her medical history was noncontributory, and she had never smoked. Intraoral examination revealed a 45-mm, rounded, reddish mass on the palate. The working diagnosis was malignant salivary gland neoplasm or maxillary sinus squamous cell carcinoma, and an

incisional biopsy was performed. The histopathological examination revealed an undifferentiated carcinoma, suggesting sinonasal origin. After being referred to an oncologist, the patient underwent surgery and radiotherapy. The histopathological examination of the excised lesion revealed an undifferentiated carcinoma, which immunohistochemical analysis revealed to be an ACC. The conflicting results of the initial biopsy and the analysis of the excised lesion indicate that this was an aggressive variant of ACC, which became an undifferentiated carcinoma, conferring a poor prognosis.

PCC-031 - MYOEPITHELIAL CELL CARCINOMA OF THE SUBLINGUAL GLAND. *GUSTAVO ZANNA FERREIRA, LUCIANA MARIA PAES DA SILVA RAMOS FERNANDES, VERA CAVALCANTI DE ARAÚJO, CLEVERSON TEIXEIRA SOARES, LUIS ANTÔNIO DE ASSIS TAVEIRA, EDUARDO SANT'ANA, PAULO SÉRGIO DA SILVA SANTOS. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO — BAURU.*

Myoepithelial carcinoma is a rare malignant epithelial tumor characterized by the presence of well-differentiated myoepithelial cells, accounting for only 1% of all salivary gland tumors. A 52-year-old patient presented with a nodule of approximately 5 cm in diameter that was resilient on palpation, with a pink surface, which had arisen approximately 7 months earlier, on the right side of the floor of the mouth. Ultrasonography of the salivary glands showed a solid nodule that was well-defined and well-vascularized. The entire lesion and the sublingual gland were surgically excised. The diagnostic hypothesis was pleomorphic adenoma, but the histopathological examination was inconclusive. The immunohistochemical evaluation of neoplastic cells disclosed positivity for p63, CK19, CEA, GFAP, 34βE12, calponin, AE1/AE3, and 1A4 , leading to a diagnosis of myoepithelial cell carcinoma. The patient is in good general condition and under follow-up.

PCC-032 - MYOEPITHELIOMA OF THE PALATE: REPORT OF 3 CASES. *BIANCA CARLA BIANCO, FERNANDA VIVIANE MARIANO, ROGÉRIO DA SILVA JORGE, PABLO AGUSTIN VARGAS, FILIPE MODOLO SIQUEIRA, LILIANE JANETE GRANDO, ROGÉRIO OLIVEIRA GONDAK. UNIVERSIDADE FEDERAL DE SANTA CATARINA.*

Myoepitheliomas are benign tumors composed predominantly of myoepithelial cells and rarely affect the minor salivary glands. Here, we report 3 cases of myoepithelioma of the palate, considering the contributions that clinicopathological and immunohistochemical findings made to the diagnosis. All 3 patients were female, ranging in age from 26 to 62 years (mean, 43.6 years), and all presented painless swelling of the palate of unknown duration. Analysis of biopsy samples showed solid, well-circumscribed masses filled with neoplastic myoepithelial cells. Microscopically, 2 were classified as plasmacytoid and 1 was classified as epithelioid. Immunohistochemical reactions revealed strong, diffuse positivity for AE1/AE3, CK7, S-100, and vimentin; moderate positivity for calponin, positive scarce cells for PCNA and negativity for CK18, SMA, EMA, and p63. The treatment of these tumors consisted of surgical excision, and the postoperative follow-up of the cases ranged from 12 to 84 months (mean, 40.3 months), without recurrence.

PCC-033 - NECROTIZING SIALOMETAPLASIA: CASE REPORT. *PRISCILLA BARBOSA DINIZ, GABRIELA FERREIRA ZANON SIMÕES, MAURÍCIO DA ROCHA DOURADO, JOÃO LUIZ DE MIRANDA, NÁDIA LAGES LIMA, ANA TEREZINHA MARQUES MESQUITA. UNIVERSIDADE FEDERAL DOS VALES DO JEQUITINHONHA E MUCURI.*

Necrotizing sialometaplasia (NS) is a rare, benign, self-limiting inflammatory process, involving salivary gland tissue, and can be mistaken for a malignant lesion both clinically and histologically. It affects individuals at an average age of 40 years, with a 2:1 predilection for males. A 17-year-old female complained of pain and a burning sensation in the palate, which had begun 15 days earlier, after the placement of an orthodontic appliance. Intraoral examination showed an ulcerated lesion with elevated borders, an irregular surface, and an irregular shape, located on the right side of the hard palate. Histopathological evaluation of an incisional biopsy revealed epithelial hyperplasia, an inflammatory reaction, squamous metaplasia in the ducts, and acinar necrosis, all of which are consistent with NS. The lesion regressed spontaneously after 2 months of follow-up. It is important to recognize NS, in order to avoid misdiagnosis and unnecessary treatment.

PCC-034 - POLYMORPHOUS LOW-GRADE ADENOCARCINOMA: REPORT OF 2 CASES. *ARELLA CRISTINA MUNIZ BRITO, DALIANA QUEIROGA DE CASTRO GOMES, JOZINETE VIEIRA PEREIRA, ROBÉRIA LÚCIA DE QUEIROZ FIGUEIREDO, CASSIANO FRANCISCO WEEGE NONAKA, POLLIANNA MUNIZ ALVES, GUSTAVO PINA GODOY. UNIVERSIDADE ESTADUAL DA PARAÍBA.*

Polymorphous low-grade adenocarcinoma (PLGA) is a malignant tumor of the minor salivary glands, usually arising in the palate, which is characterized by morphologic diversity, cytologic uniformity, and a locally infiltrative growth pattern. Here, we report 2 cases of PLGA. The first was in a 60-year-old female presenting with a symptomatic, firm mass in the retromolar region. Panoramic radiography revealed slight bony destruction. The second case was in a 92-year-old male exhibiting a well-circumscribed swelling with ulcerated overlying mucosa in the left palate. Radiography revealed slight bone involvement. In both cases, a biopsy was performed and the histopathological analysis showed proliferation of epithelial isomorphic cells that were small to intermediate in size, with moderate cytoplasm and vesicular nuclei with prominent nucleoli, distributed in solid and tubular patterns. The final diagnosis was PLGA. In both cases, the treatment was total excision of the tumor. At 2 years after treatment, both patients were free of disease.

PCC-035 - PLEOMORPHIC ADENOMA: REPORT OF A CASE IN A YOUNG PATIENT. *LISLEY VACARI ORTIZ, MARINA CURRA, VIVIAN PETERSEN WAGNER, MANOELA DOMINGUES MARTINS, MARCO ANTONIO TREVIZANI MARTINS, MARIA CRISTINA MUNERATO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO SUL/ HOSPITAL DE CLÍNICAS DE PORTO ALEGRE.*

Pleomorphic adenoma is a common benign salivary gland neoplasm in adults but is rarely found in patients less than 18 years of age. A 10-year-old male patient complained of an asymptomatic nodular lesion, on the hard palate, that had developed over a period of 5 years. Clinical examination revealed

an elastic, submucosal nodule, measuring approximately 2 × 1 cm, that did not bleed on palpation. Our diagnostic hypothesis was benign neoplasm of the salivary gland or mesenchymal neoplasm. An excisional biopsy was performed, and the histopathological examination revealed differentiation of luminal cells forming variably sized duct- and gland-like structures surrounded by single or multiple layers of non-luminal cells. The final diagnosis was pleomorphic adenoma. No sign of recurrence was observed after 2 years of follow-up.

PCC-036 - VERRUCIFORM XANTHOMA: A CASE REPORT. *FELIPE SOUZA LIMA ALENCAR, ALINE CORREA ABRAHÃO, VITOR MARCELLO DE ANDRADE, FÁBIO RAMOA PIRES. UNIVERSIDADE DO ESTADO DO RIO DE JANEIRO.*

Verruciform xanthoma is a benign inflammatory mucocutaneous lesion of unknown etiology, with a predilection for the gingiva and palate. Differential diagnoses include verrucous carcinoma and condyloma acuminatum. An 81-year-old male of Chinese descent presented with a well-defined, 4-cm exophytic verruciform growth on the left lateral border of the tongue. The patient associated the onset of the lesion with prosthetic rehabilitation with dental implants 1 year before. An excisional biopsy was performed. Due to the age of the patient, the extent of the lesion, and its anatomical location, the biopsy was performed under general anesthesia. Histological features, including the increase and invagination of epithelial rete ridges, as well as the presence of histiocytes containing lipid molecules, confirmed the diagnosis of verruciform xanthoma. The patient had been clinically followed up for 2 months with no evidence of local recurrence. Verruciform xanthoma should be included in the differential diagnosis of oral papillary lesions.

PCC-037 - SOLITARY NEUROFIBROMA: REPORT OF A CASE APPEARING AS A PEDUNCULATED NODULE. *GILBERTO CARNEIRO ALBUQUERQUE JÚNIOR, CARLA ISABELLY RODRIGUES FERNANDES, LARISSA PEREIRA LAGOS DE MELO, FÁBIO DE ABREU ALVES, DANYEL ELIAS DA CRUZ PEREZ. UNIVERSIDADE FEDERAL DE PERNAMBUCO.*

Neurofibroma is a benign nerve sheath neoplasm that is relatively uncommon in the oral cavity. A 53-year-old female was referred for diagnosis of a lingual nodule that had appeared 5 months earlier. Intraoral examination revealed a pedunculated nodule, with a smooth, regular surface and a firm consistency, on the dorsum of the tongue. The patient reported mild pain. The diagnostic hypothesis was fibrous hyperplasia. Under local anesthesia, the lesion was excised and sent for histopathological analysis. Microscopically, the lesion was composed of spindle-shape cells interspersed with a loose stroma. The tumor cells were strongly positive for S-100 protein. The final diagnosis was neurofibroma. No sign of tumor recurrence was observed at 3 years after treatment. Clinicians should be aware of the fact that neurofibromas can present as pedunculated nodules in the oral cavity.

PCC-038 - SCHWANNOMA IN HARD PALATE: CLINICAL PRESENTATION AND DIFFERENTIAL DIAGNOSIS. *ANDREZA BARKOKEBAS SANTOS DE FARIA, IGOR HENRIQUE MORAIS SILVA, ADRIANA MACHADO ZARZAR, ALESSANDRA ALBUQUERQUE TAVARES CARVALHO, LUIZ ALCINO MONTEIRO GUEIROS, JAIR CARNEIRO LEÃO. UNIVERSIDADE FEDERAL DE PERNAMBUCO.*

Oral schwannomas are uncommon benign neoplasms that usually occur on the tongue. An otherwise healthy 26-year-old male presented with an asymptomatic mass in the midline of the hard palate. Intraoral examination revealed a 2 × 2 cm fibroelastic nodule that was not tender to palpation. The working diagnosis was minor salivary gland tumor. Computed tomography revealed a bone-sparing lesion with an internal density similar to that of the adjacent soft tissues. A biopsy was performed, and microscopic analysis revealed an encapsulated tumor with a well-defined biphasic pattern (classic Antoni A and Antoni B phases), rendering a definitive diagnosis of schwannoma. Surgery was performed 30 days after the biopsy, and no recurrence was noted after 6 months of follow-up. Although rare, schwannomas should be considered in the differential diagnosis of palatal nodules.

PCC-039 - ORAL VASCULAR LEIOMYOMA: A CASE REPORT. *RENATA GUALBERTO DA CUNHA, RENATO CÂNDIDO-JUNIOR, ANTÔNIO PEDRO MENDES SCHETTINI, PATRÍCIA MOTTA DE MORAES, TATIANA NAYARA LIBÓRIO KIMURA, JECONIAS CÂMARA, SILVANA DE ALBUQUERQUE SILVA DAMASCENO. UNIVERSIDADE FEDERAL DO AMAZONAS.*

Leiomyomas are benign smooth muscle tumors, generally occurring in the uterus or gastrointestinal tract but rare in the oral cavity, where they are believed to arise from vascular smooth muscle or the salivary gland duct. A 33-year-old male was referred to a department of surgery for evaluation of an asymptomatic lesion on the lower lip that had appeared 2 years earlier. Physical examination revealed a normal-colored lesion, with the appearance of a cystic mass, which was firm in consistency and measured approximately 1 cm. The diagnostic hypothesis was mucous cyst, and an excisional biopsy was performed. Microscopic examination revealed tortuous, thick-walled blood vessels of varying sizes, mixed with bundles of fibers interpreted as smooth muscle tissue interspersed with connective tissue. Masson's trichrome staining helped to confirm the smooth muscle origin of the lesion. The definitive diagnosis was vascular leiomyoma. After 6 months of follow-up, there had been no recurrence.

PCC-040 - ORAL FOCAL MUCINOSIS: CASE REPORT. *JOÃO PAULO BARBOSA ANASTÁCIO, MARONILSON SOARES LEITE, PEDRO PAULO DE ANDRADE SANTOS, ANA CAROLINA LYRA DE ALBUQUERQUE, CYNTIA HELENA PEREIRA DE CARVALHO, ÉRICKA JANINE DANTAS DA SILVEIRA, KEILA MARTHA AMORIM BARROSO. UNIVERSIDADE FEDERAL DE CAMPINA GRANDE.*

Oral focal mucinosis is a rare clinicopathological entity that represents the mucosal counterpart of cutaneous focal mucinosis or cutaneous myxoid cyst. The etiology of oral focal mucinosis is unknown. The gingiva is the most common site, and the hard palate is the second most common. A 45-year-old male presented with a 1.2-cm painless, pedunculated mass, located in the gingiva. An excisional biopsy was performed, and the histopathological evaluation revealed a well-circumscribed lesion composed of myxomatous connective tissue containing fusiform or stellate fibroblasts. The final diagnosis was oral focal mucinosis.

PCC-041 - NASOPHARYNGEAL ANGIOFIBROMA. *EMANOELE PAIXÃO DA SILVA SILVA, INGRID ARAÚJO DE OLIVEIRA SOUSA, GAUDÊNCIO BARBOSA JÚNIOR, CÁSSIA MARIA FISCHER RUBIRA, EDUARDO SANT'ANA, PAULO SÉRGIO DA SILVA SANTOS. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO – BAURU.*

Nasopharyngeal angiofibroma is a rare, benign vascular disease that is mainly found in adolescent males. It is usually diagnosed on the basis of clinical findings, including symptoms of nasal obstruction, a nasal mass, and moderate-to-severe epistaxis, and the diagnosis is confirmed by the histopathological features of the tumor. A 54-year-old male presented with a right-sided mass affecting the paranasal and periorbital regions, with nasal obstruction, recurrent epistaxis, and painless bilateral facial swelling. The mass had first appeared 10 years earlier. Computed tomography revealed invasive growth of the mass into areas surrounding the nasal cavity, ethmoid sinus, and nasopharynx, on both sides, as well as the orbital region on the right. Microscopy showed dense fibrous connective tissue with numerous blood vessels. The final diagnosis was angiofibroma. The patient underwent surgical resection, and there had been no recurrence after 7 months of follow-up.

PCC-042 - CHERUBISM: CASE REPORT, IMAGING FINDINGS, AND REVIEW OF THE LITERATURE. *ISABELLE DA ROCHA CÂMARA, FÁBIO WILDSON GURGEL COSTA, PEDRO ESAU MACEDO MACHADO, ADRIANO DUARTE QUITANS, JORGE ANTONIO DIAZ CASTRO.*
Institution:

Cherubism is an autosomal dominant hereditary bone disorder that is characterized by the painless expansion of the mandible and maxilla in children. The disease begins in childhood and progresses until adolescence, when it stabilizes and then subsides in adulthood. Cherubism can appear as an isolated case or in members of the same family. A 13-year-old male sought treatment in our department of oral and maxillofacial surgery for a bilateral expansion of the mandible, with facial symmetry, that had evolved over a 5 year-period. Clinical examination revealed a considerable bilateral increase in the volume of the mandibular body. Patient reported no paresthesia or painful symptoms. Radiography showed bilateral multilocular lesions in the mandibular body and ramus, with cortical involvement and the presence of unerupted teeth. After 3 years of follow-up, involution of the lesion was observed.

PCC-043 - CHONDROSARCOMA INVOLVING THE HARD PALATE IN A YOUNG PATIENT. *ANA LUIZA DIAS LEITE DE ANDRADE, DENISE HÉLEN IMACULADA PEREIRA DE OLIVEIRA, HAROLDO ABUANA OSÓRIO JUNIOR, ADRIANO ROCHA GERMANO, EDILMAR DE MOURA SANTOS, LEÃO PEREIRA PINTO, LÉLIA BATISTA DE SOUZA. UNIVERSIDADE FEDERAL DO RIO GRANDE DO NORTE.*

Chondrosarcoma is a malignant tumor composed of cartilage-producing cells that rarely affects the head and neck region. This neoplasm can exhibit highly aggressive behavior and is one of the most difficult bone tumors to diagnose and treat. A 20-year-old male presented with a hardened swelling on the right side of the hard palate that had evolved over a 6-month period. Computed tomography showed an osteolytic lesion with irregular margins, located in the region of teeth #13, #14, and #15. The diagnostic hypothesis was pleomorphic adenoma. The histopathological analysis revealed a malignant neoplasm characterized by proliferation of enlarged chondrocytes showing mild cellular and nuclear pleomorphism, as well as binucleation. The chondrocytes were interspersed with an abundant cartilage matrix arranged into lobules of varying sizes. The histological diagnosis was chondrosarcoma. The patient was treated surgically and showed no recurrence or distant metastasis at 5 years of follow-up.

PCC-044 - DESMOPLASTIC FIBROMA IN A 3-YEAR-OLD GIRL: CASE REPORT WITH IMMUNOHISTOCHEMICAL ANALYSIS. *PRISCILA LIE TOBOUTI, BRUNO TAVARES SEDASSARI, NELISE ALEXANDRE DA SILVA LASCANE, VALTUIR FÉLIX BARBOSA, ISABELA WERNECK DA CUNHA, SUZANA CANTANHEDE ORSINI MACHADO DE SOUSA, DÉCIO DOS SANTOS PINTO JUNIOR. FACULDADE DE ODONTOLOGIA DA UNIVERSIDADE DE SÃO PAULO.*

Desmoid-type fibromatosis (DTF) represents a distinct rare and aggressive fibroblastic tumor with frequent recurrences and is often found in the head and neck with severe tissue destruction. One counterpart of DTF is desmoplastic fibroma (DF). There is evidence that DF is genetically related to DTF, and β-catenin can also be detected by immunohistochemistry in DF. A 3-year-old female presented a swelling, of unknown duration, in the left nasolabial fold region. Computed tomography showed an intraosseous lesion with vestibular cortical disruption. Histopathological examination revealed a mesenchymal neoplasm characterized by proliferation of fusiform, slender, spindle-shaped cells with loose chromatin and inconspicuous nucleoli. The cells had a uniform appearance and were interspersed with collagen in a sweeping fascicular pattern. An immunohistochemical panel revealed positive staining for nuclear β-catenin and vimentin, together with negative staining for S-100, SMA, HHF35, CD34 and Ki-67.

PCC-045 - MONOSTOTIC FIBROUS DYSPLASIA OF MANDIBLE: CASE REPORT. *MARIANNA SAMPAIO SERPA, ANDRÉIA FERREIRA DO CARMO, ANA LUIZA DIAS LEITE DE ANDRADE, STEFÂNIA JERONIMO FERREIRA, ROSEANE CARVALHO VASCONCELOS, ANTÔNIO DE LISBOA LOPES COSTA, HÉBEL CAVALCANTI GALVÃO. UNIVERSIDADE FEDERAL DO RIO GRANDE DO NORTE.*

Fibrous dysplasia (FD) is characterized by normal bone tissue being replaced by an excessive proliferation of cell-rich fibrous connective tissue within irregular trabecular bone. An 11-year-old female patient was referred for evaluation of a 3-cm painless intraosseous lesion, on the right side of the mandible, which had evolved over a 6-month period. Radiographic examination revealed a radiopaque, multilocular lesion between teeth #41 and #44. An incisional biopsy was performed, and the histopathological examination revealed a benign fibro-osseous lesion, in which irregular immature trabecular bone was observed in loose, cell-rich fibrous connective tissue. The peripheral area of the biopsy specimen seemed to be fused with apparently normal bone tissue. Thus, the diagnosis of FD was established. The patient remains in clinical and radiographic follow-up.

PCC-046 - CENTRAL GIANT CELL LESION: REPORT OF A CASE WITH UNUSUAL PRESENTATION. *GABRYELLA NUNES DOS SANTOS, ROBERTO PRADO, BRUNO TORRES BEZERRA, KARLA SANTOS PINTO, RICARDO LUIZ CAVALCANTI DE ALBUQUERQUE JÚNIOR. UNIVERSIDADE TIRADENTES.*

Central giant cell lesion (CGCL) is a benign intraosseous lesion. The nature of CGCL remains unclear, and it has been regarded variously as a reactive lesion, a developmental anomaly, and a benign neoplasm. A 15-year-old male presented with an asymptomatic, slow-growing swelling in the right pre-auricular region. Imaging showed a well-circumscribed osteolytic lesion, extending from the condyle toward the mandibular ramus. An incisional biopsy revealed proliferation of spindle-shaped and round cells, associated with multinucleated giant cells, within a vascular-hemorrhagic stroma. The diagnosis was CGCL. The treatment was low condylectomy involving immediate reconstruction with reconstruction plates and a condylar prosthesis. Despite the controversy regarding its nature, CGCL is classified as "aggressive" or "non-aggressive" on the basis of the clinical and radiographic features. Its occurrence in the condyle is rare, with only 9 cases reported in the last 15 years.

PCC-047 - BILATERAL MONOSTOTIC FIBROUS DYSPLASIA IN THE LOWER JAW: COMPARISON OF SURGICAL AND CONSERVATIVE TREATMENT IN THE SAME PATIENT. *ALAN VICTOR ALVES DOS SANTOS, CASSIANO FRANCISCO WEEGE NONAKA, MANUEL ANTONIO GORDÓN-NÚÑEZ, SABRINA AVELAR DE MACÊDO FERREIRA, MARIA DO ROSÁRIO DA SILVA FLOR, EUTON JEFFERSON GOMES DE AZEVEDO SILVA, FERNANDO ANTONIO PORTELA DA CUNHA FILHO. UNIVERSIDADE ESTADUAL DA PARAÍBA.*

Fibrous dysplasia (FD) is a benign bone disease that can be monostotic (involving a single bone) or polyostotic (involving multiple bones). Here, we report the case of an adult presenting with a bilateral lesion in the mandibular body. Radiographic examination showed a radiopaque lesion containing some radiolucent areas. An incisional biopsy was performed, and analysis of the biopsy sample led to a diagnosis of FD. The decision was made to treat the right side with surgery (curettage and peripheral ostectomy) and to monitor the progress of the lesion on the left side. The patient was followed up for 2 years, and the left side showed no radiographic evidence of growth. The decision to treat such lesions surgically should be made with great caution, because surgery can increase morbidity. Follow-up is crucial to detecting early recurrence of FD, and clinicians should always opt for the least traumatic intervention possible.

PCC-048 - AGGRESSIVE CENTRAL GIANT CELL LESION IN MANDIBLE: A CASE REPORT. *KAMILE LEONARDI DUTRA, MARIA INÊS MEURER, FILIPE MODOLO SIQUEIRA, ELISABETE ULSENHEIMER ROJAS, ANDRÉ LUIZ CHIODI BIM, SÔNIA MARIA LÜCKMANN FABRO, LILIANE JANETE GRANDO. UNIVERSIDADE FEDERAL DE SANTA CATARINA.*

Central giant cell lesions (CGCLs) are uncommon, non-neoplastic proliferations that are most common in young adult females. A 24-year-old female sought treatment for a highly aggressive CGCL that had evolved over a 3-month period. The lesion presented as a painful reddish-purple swelling involving the left mandible, causing significant facial asymmetry and buccal/lingual expansion, extending from the mandibular ramus to tooth #35. Computed tomography showed an expansive mass with heterogeneous impregnation by contrast media and wispy internal septa, destroying the body and ramus of the left mandible and the ipsilateral mandibular canal, in intimate contact with the tongue and with ipsilateral masseter, and measuring 5.6 × 5.1 × 5 cm. The patient was treated with calcitonin nasal spray (400 IU/day). However, the treatment was not sufficiently effective in suppressing the growth of the tumor, and it was necessary to perform a partial mandibulectomy. The patient had been fitted with a reconstruction plate and was awaiting bone reconstruction and rehabilitation.

PCC-049 - ABLATION OF EXTENSIVE TRABECULAR JUVENILE OSSIFYING FIBROMA OF THE MANDIBLE: A RARE CASE REPORT. *MARA LUANA BATISTA SEVERO, THALITA SANTANA CONCEIÇÃO, EIDER GUIMARÃES BASTOS, ANDRÉ LUIS COSTA CANTANHEDE, FABIO LAGO, MARIA CARMEN FONTOURA NOGUEIRA DA CRUZ. UNIVERSIDADE FEDERAL DO MARANHÃO.*

Juvenile ossifying fibroma (JOF) it is an extremely rare benign neoplasm, characterized by healthy bone tissue being replaced by fibrous tissue containing foci of mineralization in varying forms and amounts, which typically occurs in younger individuals. The neoplasm presents 2 variants, with different clinical and histological features: trabecular JOF and psammomatoid JOF. Functional and aesthetic effects are due to the rapid expansion of the bones involved, resulting in displacement of adjacent structures, limited mouth opening, facial asymmetry, and malocclusion. Here, we report a case of surgical removal of a trabecular JOF by hemimandibulectomy in a 9-year-old male. The hemimandibulectomy was followed by mandibular reconstruction with the aid of prototyping models. This case underscores the importance of early diagnosis and surgical planning to reducing morbidity in patients with JOF.

PCC-050 - CONDITIONS OF ORAL HEALTH AND OROFACIAL MOTRICITY IN PATIENT WITH TYPE 2 HEPATORENAL SYNDROME. *ÍTALO DE LIMA FARIAS, JOSÉ LACERDA DAS NEVES, ARMILIANA SOARES NASCIMENTO, CRISEUDA MARIA BENÍCIO BARROS, JOZINETE VIEIRA PEREIRA, MARIA DA CONCEIÇÃO DE BARROS CORREIA, LUCIANA DE BARROS CORREIA FONTES. UNIVERSIDADE ESTADUAL DA PARAÍBA.*

Type 2 hepatorenal syndrome (HRS-2) is a serious clinical condition, characterized by deterioration of renal function and fulminant hepatic failure. In this case report, we describe the implications that HRS-2 has for oral health and function. A 72-year-old white female presented with HRS-2 as a sequelae of hepatitis C treatment, after placement of a transjugular intrahepatic portosystemic shunt, which resulted in abundant gastrointestinal bleeding from esophageal varices. At 6-month interval, when the diagnosis was not established until 6 months later, there were exacerbations, including burning mouth, spontaneous gingival bleeding, strong dark staining of the hard palate, dry mouth, breath with a heavy ammonia-like odor, and difficulty in controlling the opening and closing of the mouth. The functions of chewing, sucking, and swallowing were also impaired, with a constant risk of choking and aspiration, and the condition evolved to death.