

CONCLUSION/CLINICAL SIGNIFICANCE: While LHS is considered a benign condition, ongoing monitoring and collaboration among specialists are essential to ensure comprehensive care.

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Cherubism; a rare case in childhood

Kardelen Demirel*, Menzile Seda Coşar, Seval Olmez

Department of Pediatric Dentistry, Hacettepe University, Ankara, Türkiye

INTRODUCTION: Cherubism also known as familial fibrous dysplasia of the jaws is a rare, non-neoplastic, genetic disorder which is characterized by painless bilateral symmetrical facial swelling. The present report highlights the clinical, radiological and genetic features of cherubism in a 4-year-old-boy.

CASE DESCRIPTION: A 4-year-old boy was consulted to the Pediatric Dentistry Department with cherubism pre-diagnosis from Pediatric Oncology Department with a painless, bilateral symmetrical swelling of both mandible and maxilla. Similar disease history was noted in mother of affected child. Extraoral examination revealed symmetrical expansion of jaws and no lymphadenopathy was noted. Radiographically, the lesion presented multiple soap foam-like multilocular radiolucent lesions including both maxilla and mandible except mandibular condyles. Histological findings were found to be compatible with central giant cell granuloma, and genetic examination was considered for the differential diagnosis with cherubism. Based on the patient's gene analysis, findings were found compatible with the diagnosis of cherubism.

DISCUSSION: Cherubism belongs to a group of non-neoplastic bone lesions affecting only jaws. Conditions included in the differential diagnosis of cherubism are central giant cell granuloma, giant cell tumor, fibrous dysplasia, and brown tumors of hyperparathyroidism. In addition to clinical, radiological, histopathological evaluation, genetic evaluation is also important in the differential diagnosis of cherubism. This condition is diagnosed with mutation in gene SH3BP2 located on chromosome 4p16.3. Likewise, in our case the definitive diagnosis was made genetically.

CONCLUSION/CLINICAL SIGNIFICANCE: Clinicians must consider the possibility of cherubism in a young subject with bilateral multilocular radiolucent lesions of the jaws in order to prevent unnecessary surgical procedures.

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Exfoliative cheilitis: diagnosis, treatment - a case report

Olga Asharenkova, Ella Pavlenko*, Mykola Savchenko

Department dentistry, Shupyk National Healthcare University of Ukraine, Kyiv, Ukraine

INTRODUCTION: Exfoliative cheilitis is misdiagnosed due to the similarity of clinical manifestations with other cheilitis. The disease lasts for years.

CASE DESCRIPTION: In a 52-year-old patient, after 5 days of a temperature of 38,7 °C with SARS, the red border of the lips

became dry. On the lower lip from Klein's zone to the middle there are large, translucent, yellowish scales, attached in the middle and raised at the edges, cracks. When the scale breaks off, the surface is dry, hyperemic, and there is a burning sensation. The mucous membrane, skin and corners of the lips are unchanged. From the anamnesis: anxiety, autoimmune thyroiditis, dry skin, brittle hair, nails, scales on the lips for years. Per os herbal sedative drug (prescribed by a psychiatrist), topical – gel with keratoplastic (dexpanthenol), bactericidal, antifungal (myramistin) effects, protective lipstick led to complete epithelization, disappearance of peeling on the 9th day.

DISCUSSION: The diagnosis of exfoliative cheilitis is made based on the assessment of the lesion elements and their localization on the lips. From the anamnesis, it is taken into account that the process lasts for years and is not prone to self-healing. With dehydration of the red border due to long-term high body temperature, clinical manifestations intensify. Assessment of the patient's somatic and psychoemotional state is mandatory.

CONCLUSION/CLINICAL SIGNIFICANCE: Taking into account the comorbidity of exfoliative cheilitis, consultation with a psychiatrist, endocrinologist is recommended. The appointment of sedative drugs simultaneously with drugs for local treatment leads to its success.

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McCune-Albright syndrome: a case report

Tuğçe Güngör, Birsay Gümrü*

Marmara University Faculty of Dentistry, Department of Oral and Maxillofacial Radiology, Istanbul, Türkiye

INTRODUCTION: McCune-Albright Syndrome (MAS) is a rare genetic disorder characterized by a variable combination of fibrous dysplasia of bone (FD), café-au-lait skin macules, and hyperfunctioning endocrinopathies. The aim of this study is to present a case of MAS with its clinical and radiological findings.

CASE DESCRIPTION: A 15-year-old female patient diagnosed with MAS at 8 months old was admitted to our clinic. The medical history revealed surgical operations due to bone fractures and hyperthyroidism. In clinical examination, café-au-lait skin lesions were observed in various parts of the body. The abnormal trabecular pattern in the posterior mandible observed in the panoramic radiography was confirmed by the cone beam computed tomography (CBCT) scan. Furthermore, a unilateral expansion on the left posterior mandible compatible with FD was detected. Panoramic and cephalometric radiographs revealed dental and skeletal development delays of 4.36 and 1.87 years, respectively.

DISCUSSION: The delay in dental development, as predicted during the intra-oral examination and confirmed by Cameriere's European Formula, exceeded that of skeletal age calculated by Cameriere's fourth cervical vertebrae formula. No pathological findings were detected, except for the radiographic image compatible with FD. Radiological follow-ups are of utmost importance, particularly in children, as while malignant transformation of FD is rare, malignant changes to osteosarcoma and chondrosarcoma have been reported in MAS.