CEMENTO-OSSIFYING FIBROMA ON THE ANTERIOR MANDIBLE REGION

(FIBROMA CEMENTO-OSSIFYING PADA REGIO DEPAN RAHANG BAWAH)

Isnandar*, Kasman Manullang*, Hendro Sudjono Yuwono**

* Department of Oral and Maxillofacial Surgery
Faculty of Dentistry, North Sumatera University
Jl. Alumni No. 2, Kampus USU, Medan 20155
* Department of Oral and Maxillofacial Surgery
Faculty of Dentistry, Padjajaran University
** Department of Vascular Surgery
Faculty of Medicine, Padjajaran University
Jl. Dr. Hasan Sadikin General Hospital, Bandung
Email: ndarbm@gmail.com

Abstract

Cemento-ossifying fibroma (COF) is a rare benign tumor which mostly affects the mandible and the most common site is in the premolar-molar region. It is a painless, generally slow-growing, benign lesion which enlarges in an expansive manner. It is usually detected in the third and fourth decade of life and is more common in women. Radiographically, they appear as well-defined unilocular or multilocular intraosseous mass in the premolar-molar region of the mandible. The lesion is invariably encapsulated and with mixed radiolucent density. Its histopathology shows fibrous tissues with calcified structures resembling bone or cementum. This article reports a rare case of a 20-year old male with history of swelling in the anterior mandible region at tooth region 33-43 causing difficulty in occlusion. We have performed marginal resection and put AO plate crossing the bone defect. There was no wound dehiscence and exposed AO plate after six months of close observation. In conclusion, the mass has been successfully excised and reconstructed using AO plate. Patient has been referred to the prosthodontic department for having a denture.

Key words: cemento-ossifying fibroma, marginal resection, AO plate

INTRODUCTION

Cemento-ossifying fibroma (COF) is a rare benign tumour that usually arises from the mandible and maxilla, which mostly affects the mandible (62 - 89%) rather than maxilla. The premolar-molar region of the posterior mandibular region is the most common site (77%). The first presenting symptom of patient is usually facial asymmetry. Other locations within the head and neck have also been described. 1-3

COF is a fibro-osseous lesion that arises from the periodontal membrane. This is a layer of fibrous connective tissue surrounding the roots. It contains of multipotential cells that are capable of forming cementum, lamellar bone, and fibrous tissue. This neoplasm occurs in patients with a wide age range, but the most number of cases are encountered during the third and fourth decade of life. There is a definite female predilection with female-to-male ratio is as high as 5:1. If the lesion involves the adjacent teeth, then the teeth is often displaced and occasionally resorbed. It is a painless, generally slow-growing benign lesion which enlarges in an expansive manner and sometimes reaching a large size which may result in considerable deformity. 1,2,3,7,10

Radiographically, they appear as a well-defined unilocular or multilocular intraosseous mass in the premolar-molar region of the mandible. The lesion is invariably encapsulated with mixed densities on X-ray. The term "cemento-ossifying fibroma" is used to describe fibrous lesions containing calcifications with strong similarity between bone and cementum. Although WHO and some authors regard the cementifying fibroma (CF) as an odontogenic tumor and consider ossifying fibroma (OF) separately as a non-odontogenic neoplasm, however