

An unusual case of regional odontodysplasia

Regional odontodysplasia: an unusual case with a conservative approach A. C. Lopes Marques, W. H. Castro, M. A. Vieira do Carmo *Br Dent J* 1999; 186: 522-524

Abstract

A case of a 14-year-old male with regional odontodysplasia is reported. In this presentation many atypical clinical and radiographical features of this condition are present. The chief complaint of the patient was the enlargement of the gingiva and, according to the literature, inflammatory processes are the main reason why patients look for care. Moreover, there was no radiographic evidence of unerupted teeth in this report. The functional and psychological benefits of the conservative approach are emphasised.

In brief

- Regional odontodysplasia is an unusual disorder that affects children and, in many cases, is misdiagnosed as other diseases.
- In the present study some clinical and radiographic findings are different from the cases reported in the literature.
- This paper helps clinicians to better identify this condition with emphasis on the conservative approach that can bring many benefits to the patient.

Comment

Odontodysplasia is a relatively rare dental anomaly in which the development of one or several teeth in a localised area is adversely affected. The cause of odontodysplasia is unknown in so much that there is no identifiable history of previous infection or trauma in the affected region. More recently it has been proposed that the condition is linked to either a local neural disorder or vascular defect.¹ However, at the present time the aetiology remains uncertain due to the scarcity of adequately detailed case reports. Lack of information also makes it difficult to determine what features may be considered as unusual in the presentation of newly diagnosed cases. However, the patient described in the present study does demonstrate certain findings that contrast with those previously reported. Firstly, the patient was male rather than female and secondly the mandible rather than the maxilla was the site of involvement. Most importantly perhaps, was the observation that the patient did not suffer from acute abscess formation

of any of the teeth involved. This important feature had an impact on the management of the case.

To date the treatment of odontodysplasia has remained somewhat controversial. Management has traditionally involved the early extraction of affected teeth in order to prevent acute abscess formation. However, in the present case such prophylactic extraction was not performed. Interestingly, the conservative approach adopted by the authors was not subsequently complicated by the onset of acute infection. In the short term the patient did not have to experience extraction or wearing of a prosthesis at a young age and in the longer there is likely to be less adverse effect on mandibular development.

An increased recognition of regional odontodysplasia by clinicians should not only clarify the pattern of clinical features that may be regarded as being within a normal range but also lead to an improvement in both the short and long term management of patients with the condition. The

publication of detailed case reports, such as the present one, should be of interest not only to specialists involved in the dental care of children but also general dental practitioners.

1 Khan M A, Hinson R L. Regional odontodysplasia. *Oral Surg, Oral Med, Oral Path* 1991; 72: 462-467.

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