

2025

### KARNATAKA RADIOLOGY EDUCATION PROGRAM

## **CASE PRESENTATION**

CASE OF JAW LESION

MENTOR: DR G C PATIL

KMCRI, HUBBALLI.

PRESENTOR: DR. SHRUTHI

- NAME:Mrs.X
- Age:29y/F
- Resident :hubli

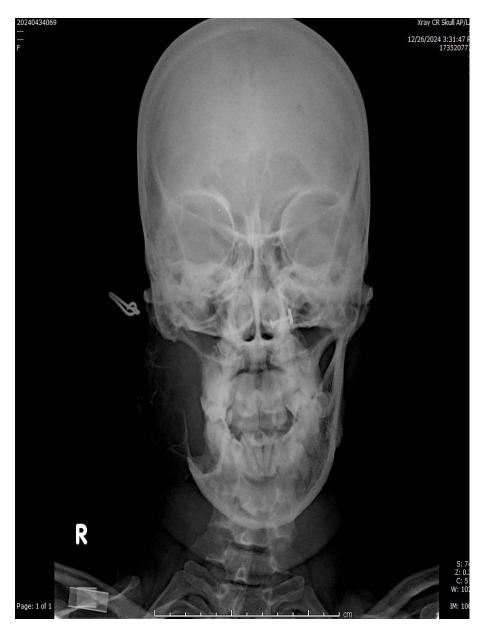
- HOPI:swelling at the right side of the jaw since a year - progressively increasing since 6months
  - ✓ No h/o caries, fever, trauma, surgery,
  - ✓ Not on any medication

- Medical history: No h/o DM,HTN,hypo/hyperthyroidism.
- Obstetric history:P2L2
- Menstrual history:nothing significant

On examinat

- √ facial asymmetry
- ✓ Diffuse swelling warm on touch, extending from right ear pinna to lower border of mandible (6x6.5cm)
- ✓ Mouth opening -2 1/2 fingers- reduced



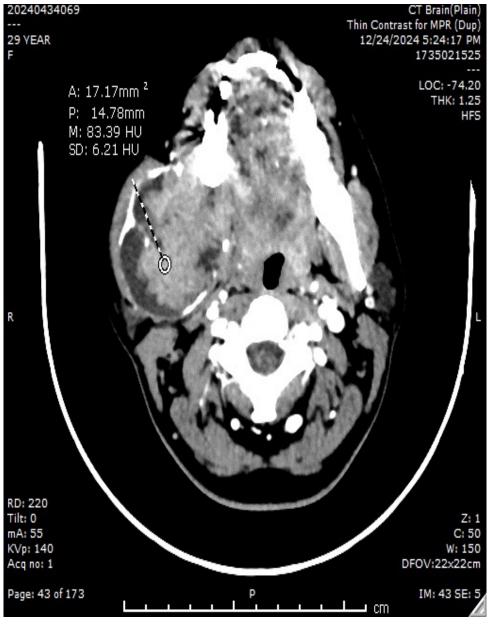


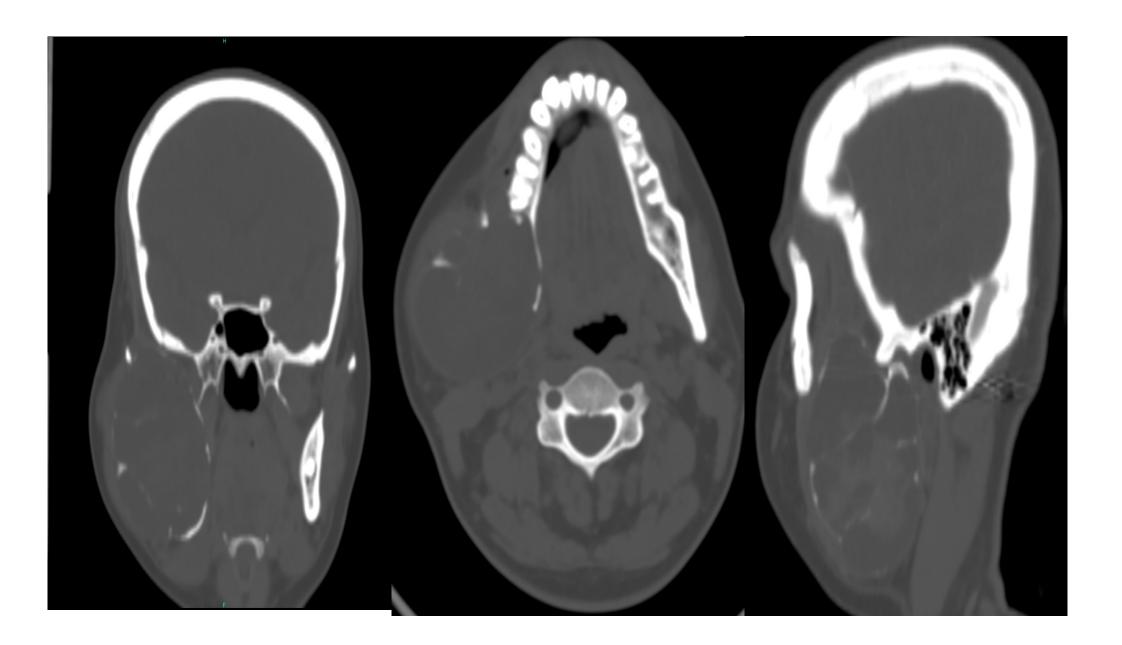


 Large solitary expansile multilocular lytic lesion mass seen at body,ramus and condylar process of the right hemimandible with thinned out cortex giving soap bubble appearance.

DDs 1)ameloblastoma
2)odontogenic kerato cyst





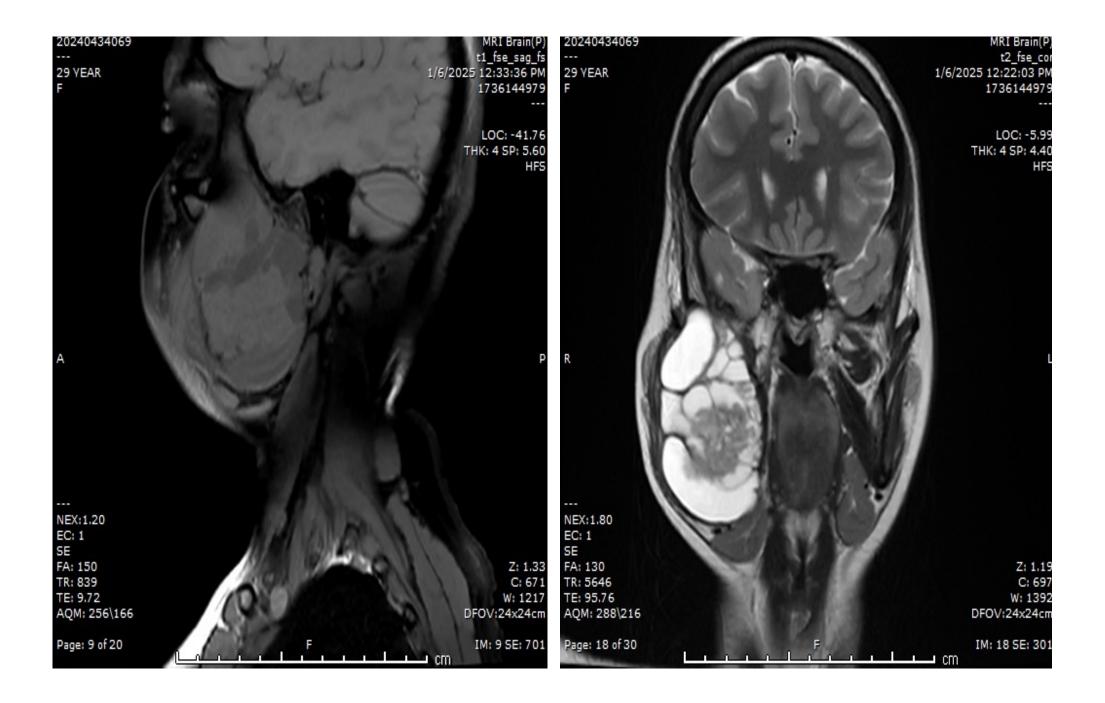


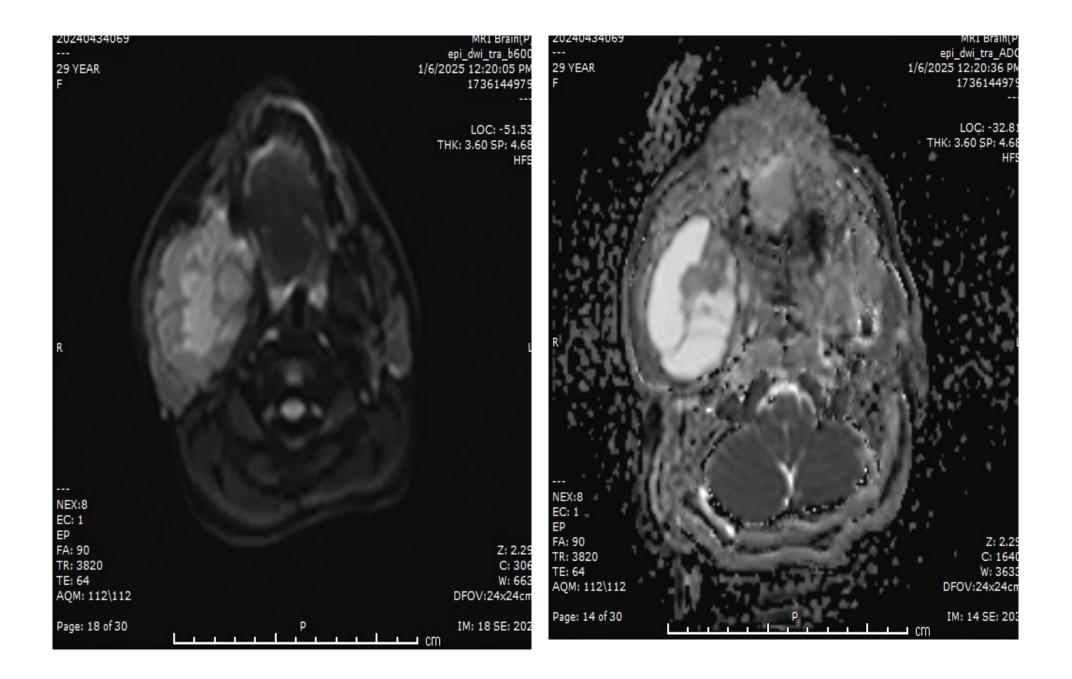




## $\mathsf{CT}$

- Large expansile multilocular solid cystic lesion with thinned out cortex noted involving body, ramus and coronoid, condylar process of mandible on right side.
- It measures ~ 4.8x5.0x7.2cm(TRXAPXCC). Lesion contains enhancing solid component with cystic areas within with resorption of adjacent teeth.
- It shows buccolingual expansion-->ameloblastoma.





## **MRI**

- Large expansile multilocular solid cystic lesion , T1 hypointense , T2/FLAIR hyperintense
- solid component showing diffusion restriction and low ADC values with thinned out cortex noted involving body, ramus and coronoid, condylar process of mandible on right side.
- It measures ~ 4.9x5.20x7.1cm(TRXAPXCC) ->ameloblastoma

Department: SURGERY ONCOLOGY	HPR No: B-1545/25	
Lab Name: PATHOLOGY	Report Date:20 /03 /2025	

#### HISTOPATHOLOGY REPORT

#### SPECIMEN:

Specimen of Right Hemimandibulectomy.

#### GROSS:

Specimen sent as Right hemimandibulectomy with 2 teeth insitu measuring 8.5×8×6 cm. External surface appears to be expanded at angle and ramus of the mandible, cystic in consistency measuring 7×5×5 cms. Ulceration noted on mucosal surface measuring 1.5×1 cmon alveolar surface (behind teeth). Cystic opening present in posterior aspect measuring 1.5 cm in diameter. Cut surface is multiloculated greyish white solid-cystic lesion noted. Largest cystic lesion measuring 3×3 cm. Grey white solid area measuring 4×2.5 cm, soft to firm in consistency with microcystic mucoid filled areas. Tumour is 2cm from anterior bony margin.

#### MICROSCOPY:

Section studied shows tumour tissue arranged in the form of islands seperated by fibrocollagenous stroma. These tumour islands are lined by odontogenic epithelium. Central portion of tumour island shows tumour cells arranged in reticular pattern. Also seen are varying sized multiple cysts lined by flattened epithelium and many proliferating blood vessels. Focal areas of tumour cells show squamoid differentiation. Anterior body margin is unremarkable and free from tumour.

#### IMPRESSION:

Features are suggestive of **AMELOBLASTOMA - FOLLICULAR VARIANT.** 

DR SATEESH S CHAVAN

KMCRI HUBLI

# THANK YOU