Case of a sialo-odontogenic cyst mimicking a dentigerous cyst

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Introduction: The sialo-odontogenic cyst is a rare entity, having only been recently described in the literature. These cysts can display local aggressive growth patterns and have a risk of recurrence. We describe a case of a sialo-odontogenic cyst presenting with radiographic features similar to that of a dentigerous cyst.

Case: The patient was referred to our oral surgery department following a chance finding of a radiolucency surrounding the crown of his unerupted right mandibular third molar. Following clinical and radiographic examination, a cone beam computed tomography scan confirmed the cyst and associated third molar to have an intimate relationship with the inferior dental nerve canal. Cyst enucleation and coronectomy of the mandibular third molar was performed under day-case general anesthetic. The cyst lining was sent for histopathological examination. The patient was reviewed clinically and radiographically post-operatively. Histopathological examination revealed the lesion to be a type of sialo-odontogenic cyst with a risk of recurrence. Whilst the patient did experience short-term post-operative neuropathy this resolved within 6 months. The patient has since been asymptomatic. Signs of healing were demonstrated both clinically and radiographically with no evidence of cyst recurrence.

Discussion: Sialo-odontogenic cysts are known to mimic a variety of lesions, ranging from benign lesions such as dentigerous cysts to malignant neoplasms. This case highlights the importance of histological confirmation of diagnosis of lesions despite characteristic radiographic features. Due to their locally aggressive nature and risk of recurrence we would advise early management and regular radiographic review.

Biography
Omesh Modgill completed his BDS at the University of Bristol and has since obtained a Post-graduate teaching qualification in Dental education. Following a year of employment in general dental practice, he completed two years of training as a senior house officer in an oral and maxillofacial surgery unit. He currently works as a specialty doctor in the oral surgery department of Kings College Hospital in London. He has previously published in a leading British dental journal and is actively involved in departmental research and audit projects.

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