



ORIGINAL ARTICLE

# Sialolithiasis of minor salivary glands: A review of 17 cases



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## KEYWORDS

minor salivary gland;  
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**Abstract** *Background/purpose:* To our knowledge, sialolithiasis in minor salivary glands is very rare, and information about the disease is limited. The current study aimed to provide updated data regarding the disease in Taiwan. The data were compared with those of previous case series studies.

*Materials and methods:* The features of 17 cases of histopathologically confirmed sialolithiasis in minor salivary glands between 1991 and 2015 in our institution were retrospectively analyzed. *Results:* Most of the patients were male ( $n = 14$ ; 82.35%), with only three female patients (17.65%). The mean age of the 17 patients was 62.93 years (range, 35–82 years). Fifteen cases (~88%) were found within the 6<sup>th</sup>–9<sup>th</sup> decades. Seven cases (~41%) were identified in patients aged  $\geq 70$  years, six of which had been diagnosed in the most recent 5 years (2011–2015). The most common site was the buccal mucosa ( $n = 7$ ; 41.18%), followed by the upper lip ( $n = 5$ ; 29.41%), lower lip ( $n = 3$ ; 17.65%), and vestibule and retromolar area (each  $n = 1$ ; 5.88%). Only one case (5.88%) was clinically diagnosed as sialolithiasis prior to biopsy examination.

*Conclusion:* The current study demonstrated an aging tendency and a male predilection of sialolithiasis in minor salivary glands in Taiwan when compared with published case series studies. Copyright © 2015, Association for Dental Sciences of the Republic of China. Published by Elsevier Taiwan LLC. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

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## Introduction

Sialolithiasis, which usually causes duct obstruction, inflammation, or a painful infection, is a common disease of the major salivary glands (SGs). On the other hand, the symptoms of this disease in minor SGs may be painless or may manifest as mild tenderness, which is easily ignored. To the best of our knowledge, since the first case reported by Papin<sup>1</sup> in 1865, there have been approximately 270 cases of sialolithiasis of minor SGs reported in English-language literature<sup>1–30</sup>; however, only five case series studies on sialolithiasis of minor SGs are available.<sup>8,11–13,29</sup>

To provide updated findings regarding sialolithiasis of minor SGs in Taiwan, the current study aimed to evaluate the characteristics of sialolithiasis of minor SGs histopathologically diagnosed by the oral pathology and maxillofacial radiology department of a teaching hospital in southern Taiwan. Additionally, the findings were compared with those of the five previous case series reports in the literature.<sup>8,11–13,29</sup>

## Materials and methods

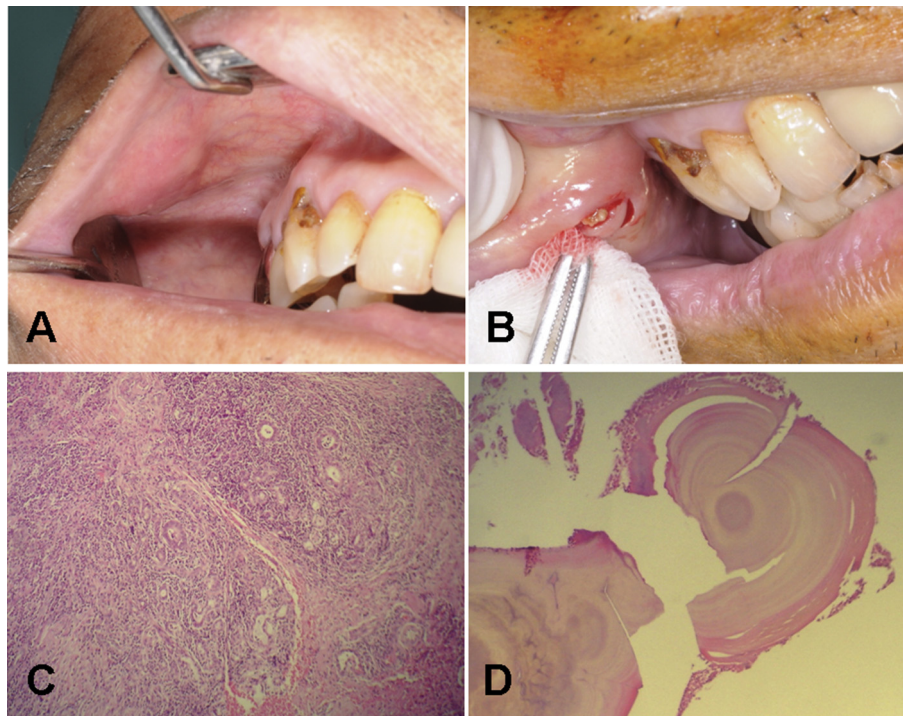
A total of 17 cases of sialolithiasis of minor SGs confirmed by histopathological examination, as indicated in Figure 1, were retrieved from the database of the oral pathology and maxillofacial radiology department between January 1991 and January 2015. The age, year of diagnosis, sex, clinical impression, and treatment of the 17 cases were

retrospectively analyzed and compared with those in the published case series studies.<sup>8,11–13,29</sup>

## Results

A total of 72 cases of sialolithiasis were identified in the database of the oral pathology and maxillofacial radiology department, 17 of which occurred in minor SGs (23.61%). The features of these 17 cases, including age, year of diagnosis, gender, clinical impression, and treatment, are summarized in Table 1.

Briefly, the mean age of the 17 patients was 62.93 years (range, 35–82 years). Most cases ( $n = 15$ ; 88.23%) were identified within the 6<sup>th</sup>–9<sup>th</sup> decades; seven patients (41.18%) were aged  $\geq 70$  years, six of whom had received a diagnosis in the most recent 5 years (2011–2015). The patients were predominantly male ( $n = 14$ ; 82.35%), with only three female patients (17.65%). The most common location was the buccal mucosa ( $n = 7$ ; 41.18%), followed by the upper lip ( $n = 5$ ; 29.41%), lower lip ( $n = 3$ ; 17.65%), and vestibule and retromolar area (each  $n = 1$ ; 5.88%). Only 1 of the 17 cases (5.88%) was clinically diagnosed as sialolithiasis prior to biopsy; the clinical impressions of the remaining cases were fibroma ( $n = 4$ ; 23.53%), oral cancer or oral precancerous lesions ( $n = 4$ ; 23.53%), mucocele ( $n = 3$ ; 17.65%), minor salivary gland tumor ( $n = 3$ ; 17.65%), and inflammation ( $n = 2$ ; 11.76%). Fourteen of the 17 patients (82.35%) had undergone surgical excision.



**Figure 1** Clinical and pathological presentation of Case 17. (A) An 82-year-old male found a firm mass over his right upper lip. (B) An excisional biopsy was performed with the clinical impression of a salivary gland tumor, and yellowish hard tissue was found in the lesion during the operation. Microscopically ( $\times 100$ , hematoxylin–eosin stain), it was characterized by (C) inflammatory minor salivary gland tissue and (D) laminated oval-shaped calcified tissue.

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