

Original Contributions

Diagnostic Challenge

An unusual birthmark

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THE CHALLENGE

A 19-year-old woman of African descent came to the dental clinic at the Faculty of Dental Medicine, Université de Montréal, Montréal, Québec, for a complete oral examination. Her medical history indicated she had sickle cell anemia and mild asthma. She took no medications and reported no surgical history and no known allergies. She occasionally smoked marijuana but had no history of tobacco use. She did not have any specific symptoms and sought preventive oral health care at the clinic.

During the extraoral examination, we noted a remarkable blue-gray macule surrounding the iris of the patient's right eye (Figure 1). The patient said that this pigmentation had been there since birth and that her pediatrician had diagnosed it as a birthmark. According to her, the lesion has been stable and asymptomatic, with no variation in size or color. On closer examination of her facial skin, we noticed an ash-gray discoloration of the right cheek, temporal area, and forehead (Figure 2). She admitted to covering these pigmented macules with makeup. The extraoral examination results were otherwise within normal limits.

The intraoral examination results revealed brown pigmentation of the maxillary and mandibular facial attached gingiva, consistent with physiological melanosis. We also noticed a grayish brown, irregularly shaped macule on the posterior portion of the patient's hard palate (Figure 3). The lesion did not blanch with pressure, was 9 by 14 millimeters, and was homogeneous in color. The patient was not aware of the lesion. The rest of the intraoral examination results were within normal limits.



Figure 1. Dark blue-gray discoloration surrounding the iris of the right eye in a 19-year-old female patient.



Figure 2. Macular ash-gray pigmentation of the right cheek, temporal, and forehead areas.

(Please see next page for additional images.)



Figure 3. A dark grayish brown irregularly shaped macule of 9 by 14 millimeters in the middle of the posterior portion of the patient's hard palate.

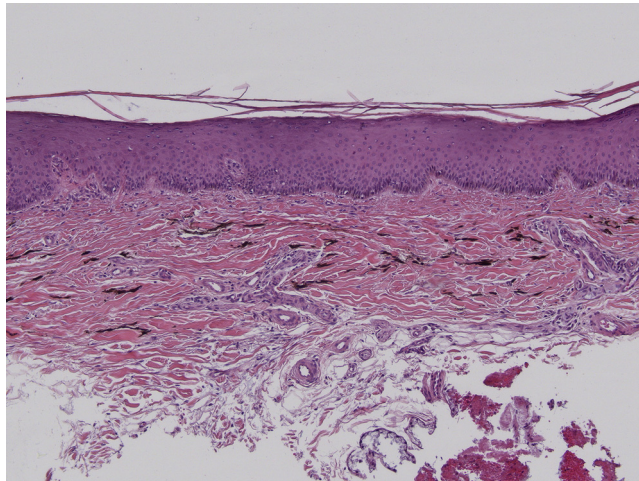


Figure 4. Medium-power photomicrograph showing orthokeratotic stratified squamous epithelium with underlying dense fibrous connective tissue. Pigmented elongated dendritic melanocytes are visible within the superficial and reticular layers of the connective tissue (hematoxylin and eosin, $\times 10$ magnification).

We performed an incisional biopsy of the palatal macule. Histopathologic examination results showed orthokeratotic stratified squamous epithelium with underlying dense fibrous connective tissue. The connective tissue supported scattered elongated dendritic melanocytes within the superficial and reticular layers. The epithelium was normal in appearance, with no increase in the number of melanocytes. Normal-looking minor salivary glands were present at the base of the specimen (Figure 4).

Can you make the diagnosis?

- | | |
|----------------------------|---------------|
| A. physiological melanosis | D. Hori nevus |
| B. melanoma | E. blue nevus |
| C. nevus of Ota | |

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