DENTAL CARIES PREDISPOSING TO PYOGENIC GRANULOMA

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ABSTRACT

Pyogenic granuloma are common reactive lesions occurring as a result of chronic infection or constant irritation. The clinical appearance of pyogenic granuloma is non-specific. We report a case of pyogenic granuloma occurring as a result of food entrapment between teeth, which was managed by surgical excision of lesion and restoration of caries tooth.
Keywords: Pyogenic granuloma, Reactive lesion, Surgical excision, Food entrapment.

INTRODUCTION

Pyogenic granuloma occurs in the oral cavity as an overgrowth of tissue in response to various stimuli such as low-grade local irritation, traumatic injury or hormonal changes. They occur predominantly in young females due to vascular effects of female hormones[1].

CASE REPORT

A 42 year old female reported to the Department of Oral & Maxillofacial surgery, Rajas Dental College & Hospital, with a growth over her gums in the right upper back jaw since 4 months. Patient gave history of food entrapment in the same region for over 4 months, which she removed using tooth pick. Examination revealed, a 2x 3 cm, red, elevated, pedunculated mass over the buccal, interproximal and palatal aspect of right maxillary molars. Peduncle was found to be attached in the interproximal region. On palpation growth was soft, tender and friable. No pulsation felt in the mass. 16 had proximal caries and non-tender to percussion

TREATMENT

Patient underwent routine blood investigation and it was normal. In Operation theatre excisional biopsy was done under local anesthesia. Bleeding points cauterized and hemostasis achieved. Patient was given Cap Amoxicillin 500mg tid and Tab Dolo 650mg SOS for 5 days.

16 proximal caries excavated and composite restoration given. Histopathology (H/P) report revealed a non-specific pyogenic granuloma.

Patient was evaluated at 1 week, 4 weeks, 8 weeks and 6 months. In first week itself healing was good in operated site, and patient did not experience any problem even after 6 months.

DISCUSSION

A Maxillofacial Surgeon comes across various kinds of gingival growths presenting as peripheral or central lesions. Pyogenic granuloma are established reactive lesions occurring as a result of minor trauma or chronic irritation[2]. In our case, chronic food impaction between 16 and 17 and subsequent removal using tooth pick caused irritation to the gingival tissues leading to pyogenic granuloma.

Managing such growth requires proper clinical, radiographic, laboratical and histological evaluation. The decision of choice of procedure was dictated by the vascular nature of the growth and its extent. The etiology for the growth should always be borne in mind and definitely eliminated with proper oral hygiene measures and restoration of cavities.

CONCLUSION

Pyogenic granuloma are extremely common gingival growth. Histopathology remains the mainstay for a conclusive diagnosis.

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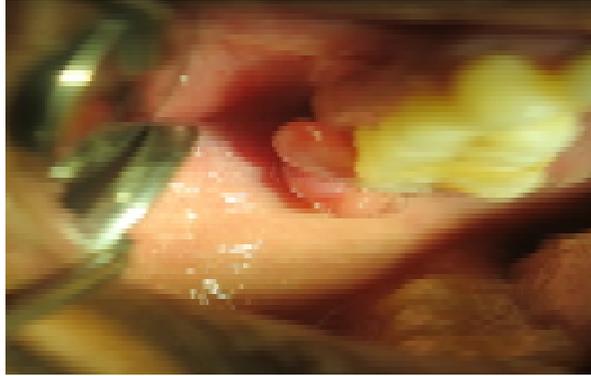
Figure 1: Pre operative photo showing a growth in upper right molar region.

Figure 2: Excised tissue send for histopathology.