

PERIPHERAL OSSIFYING FIBROMA : A CLINICAL DILEMMA

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INTRODUCTION:-

Peripheral ossifying fibroma, a term of considerable confusion, is a non neoplastic enlargement of the gingiva which is thought to be reactive in nature. The most common site is the anterior maxilla, with a higher incidence in females.

It is a non-neoplastic inflammatory response of the connective tissue or superficial periodontal ligament to low grade irritation, such as trauma, plaque, calculus, microorganisms, masticatory forces, ill- fitting dental appliances and poor quality restorations.

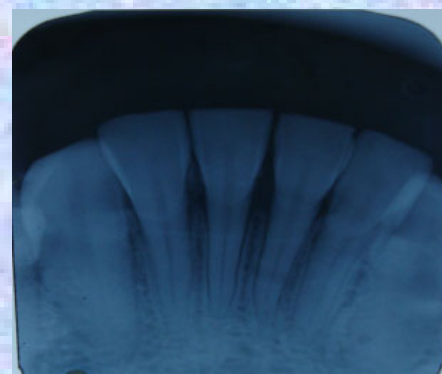
OBJECTIVE:-

Complete removal of growth in the mandibular anterior region for maintenance of function and esthetics and the prevention of recurrence of such growth in future.

Material and method:- *A 28-yr-old female patient presented with a chief complaint of painless swelling in the lower front region which recurred after 7 months. The swelling was pedunculated with a smooth surface and fibrous in consistency. This pedunculated, fibrous growth was excised in toto with meticulous root planning. A full-thickness periodontal flap was reflected to curette the underlying bone. Histopathological examination of the specimen was done.*



PRE-OPERATIVE



RADIOGRAPH

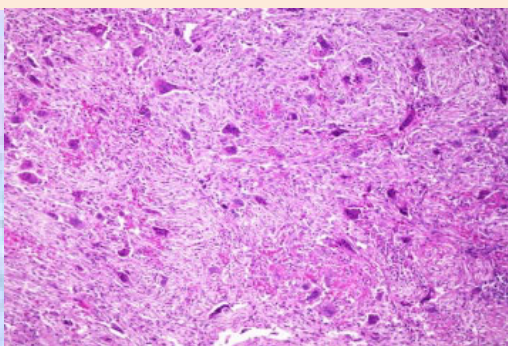


INTRA-OPERATIVE



EXICISIONAL BIOPSY

RESULTS:- Histopathological examination revealed nonencapsulated mass of cellular fibroblastic connective tissue with densely cellular stroma containing calcified components. No evidence of malignancy was reported. The connective tissue was infiltrated with chronic inflammatory cells.



HISTOPATHOLOGICAL EXAMINATION



POST-OPERATIVE

CONCLUSION: *When a gingival overgrowth is found, it is important to formulate an appropriate diagnosis of the condition, which would help in the management of the patient. The treatment of choice involves total surgical excision of the mass with meticulous root planning and curettage of the area to prevent recurrence.*

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