



# Oral Pathology

# Oral Pathology

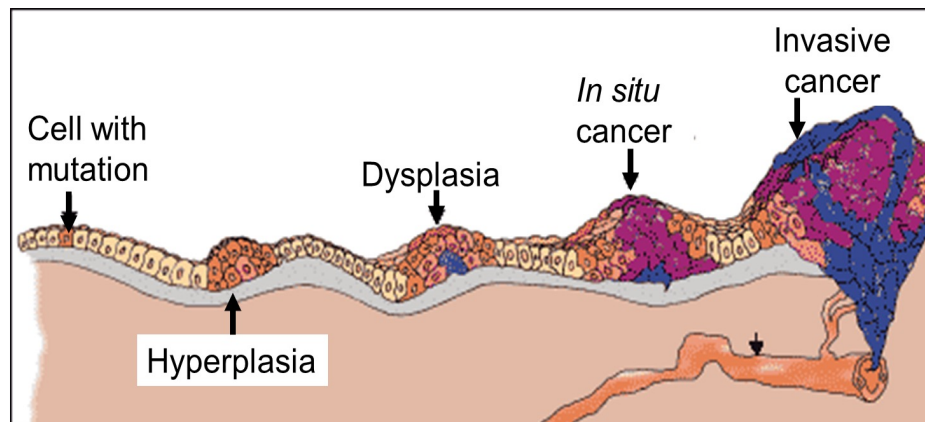
- Developmental Conditions
- Mucosal Lesions—Reactive
- Mucosal Lesions—Infections
- Mucosal Lesions—Immunologic Diseases
- Mucosal Lesions—Premalignant
- **Mucosal Lesions—Malignant**
- CT Tumors—Benign
- CT Tumors—Malignant
- Salivary Gland Diseases—Reactive
- Salivary Gland Diseases—Benign
- Salivary Gland Diseases—Malignant
- Lymphoid Neoplasms
- Odontogenic Cysts
- Odontogenic Tumors
- Bone Lesions—Fibro-Osseous
- Bone Lesions—Giant Cell
- Bone Lesions—Inflammatory
- Bone Lesions—Malignant
- Hereditary Conditions

# Cancer Types

- Carcinoma → epithelial
- Sarcoma → mesenchymal (CT)
- Leukemia → blood
- Lymphoma → lymphatic

# Cancer Stages

- Dysplasia= pre-cancer
- Carcinoma in situ= all of the epithelium is affected
- Malignant neoplasm= cancer, as soon as it **invades** past the basement membrane
  - Local invasion → connective tissue
  - Metastasis → access to blood or lymph to travel around body



# Verrucous Carcinoma

- Tobacco and **HPV 16 and 18** are causes
- Slow-growing malignancy
- Tx: excision



# Squamous Cell Carcinoma

- Caused by oncogenes or inactivation of tumor suppressor genes
- Increased incidence of oropharyngeal SCC associated with HPV 16 and 18
- 5-year survival is about 50%
- **Plummer-Vinson Syndrome**= mucosal atrophy + dysphagia + iron deficiency anemia + increased risk of oral cancer
- Tx: excision or radiation



# Basal Cell Carcinoma

- Due to sun damage
- Very rarely metastasizes
- Tx: surgery



# Oral Melanoma

- Malignancy of melanocytes
- High-risk sites are palate and gingiva
- 5-year survival for skin lesions is greater than 65%, but less than 20% for oral lesions

