



Oral Pathology

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- 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

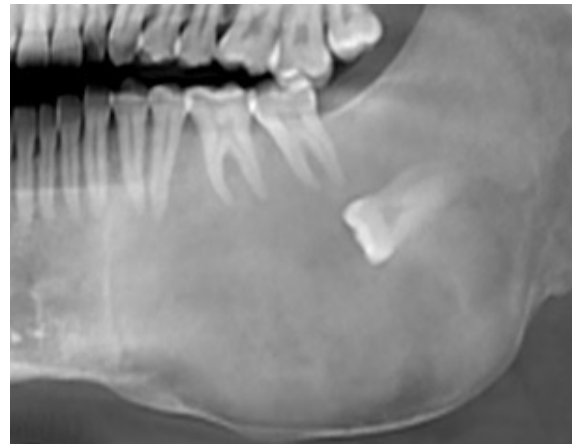
Central Ossifying Fibroma

- Composed of fibroblastic stroma in which foci of mineralized products are formed
- **Central**= bone, well-circumscribed radiolucency
- **Peripheral**= gum
- Juvenile= aggressive variant, rapid growth, younger patients
- Similar in appearance and behavior to cementifying fibroma (odontogenic tumor)
- Tx: surgical excision



Fibrous Dysplasia

- Ground-glass appearance
- Usually stops growing after puberty
- **McCune-Albright Syndrome**= polyostotic (more than one bone) fibrous dysplasia + cutaneous café au lait spots + endocrine abnormalities like precocious puberty
- Tx: surgical recontouring for cosmetics



Periapical Cemento-Osseous Dysplasia (PCOD)

- Reactive process of unknown origin
- Most common at apices of mandibular anterior teeth
- Most common in middle-aged black female
- Teeth are vital
- Lucent → Opaque
- Tx: none



Osteoblastoma

- Circumscribed opaque mass of bone and osteoblasts
- Tx: surgical excision

