Radiographic Appearance of Ameloblastoma

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Discussion

Radiologically, the lesions are expansile, with thinning of the cortex in the buccal–lingual plane. The lesions are classically multilocular cystic with a “soap bubble” or “honeycomb” appearance. On occasion, conventional radiographs reveal unilocular ameloblastomas, resembling dentigerous cysts or odontogenic keratocysts. The radiographic appearance of ameloblastoma can vary according to the type of tumour. In a patient with a swelling in the jaw, the first step in diagnosis is panoramic radiography.

Ameloblastoma is a benign odontogenic tumour usually located in the jaw bone. The tumour is thought to originate from sources that include residual epithelium from tooth germ; epithelium of odontogenic cysts; stratified squamous epithelium; and epithelium of the enamel organ. It represents approximately 1% of oral tumours; 80% of ameloblastomas occur in the mandible and the remaining 20% in the upper jaw. The area of the mandible that is most affected is the third molar region. Reported cases of ameloblastoma occur over a wide range of ages, with the mean age in the 20s or 30s, and with equal frequency in men and women. Clinically, ameloblastoma appears as an aggressive odontogenic tumour, often asymptomatic and slow growing, with no evidence of swelling. It can sometimes cause symptoms such as swelling, dental malocclusion, pain and paresthesia of the affected area. It spreads by forming pseudopods in marrow spaces without concomitant resorption of the trabecular bone. As a result, the margins of the tumour are not clearly seen on radiographs or during surgery and the tumour frequently recurs after inadequate surgical removal. The appearance of septae on the radiograph usually represents differential resorption of the cortical plate by the tumour and not actual separation of tumour portions. Because of its slow growth, recurrences of ameloblastoma generally present many years.
Illustrations

Illustration 1

Radiological appearance of ameloblastoma in mandible

Illustration 2

Soap bubble appearance
Illustration 3

Buccolingual cortical plate expansion on occlusal radiograph
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