

# Pathology and Surgical Pathology

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## Inflammatory radicular cyst

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**P**atient, 27 years old, male, brown-skinned was referred to the Federal University of Uberlândia's Dental care unit for an endodontic treatment of the left maxillary central incisor. Intraoral clinical and radiographic examination suggested a hypothesis of diagnosis compatible with chronic apical periodontitis. The treatment was performed in two sessions, using manual instrumentation system according to the goerig technique combined with replacement of the intracanal medication in between sessions. The obturation was satisfactory and the tooth was restored with a pin-retained metal ceramic crown. Six months posterior to the treatment, the patient returned presenting clinical signs of a fistula. Radiographic examination sustained the hypothesis of chronic apical periodontitis (cyst or granuloma). It was suggested the patient should undergo an apicectomy surgery followed by an excisional biopsy of the lesion preserving the restorative prosthetic treatment and discarding the possibility of an endodontic retreatment. After the flap was lifted, it became possible to identify a

crack in the root, which was confirmed by the colorimetric method. The sample was stored in 10% formaldehyde and sent to histopathological analysis at the Federal University of Uberlândia's pathological laboratory. The results suggested inflammatory odontogenic cyst, root cyst type. Six months posterior the procedure, the fistula returned and the tooth was kept on follow up. In this case, the parendodontic surgery represented the most conservative plan of treatment. It is important to emphasize the need to send the biopsied tissue to histopathological analysis to confirm the diagnosis and help the patient's condition preservation.

### Speaker Biography

Denildo de Magalhães, PhD and MSc in Dentistry from the University of São Paulo, Brazil. He is currently a full professor at the Federal University of Uberlândia in the faculty of dentistry in the area of Periodontics.

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