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INTRAORAL MELANOMA OF THE INTERPROXIMAL PAPILLA: A RARE PRESENTATION. *ALBERTO JOSE PERAZA LABRADOR*

A 37-year-old woman, with no history of diseases or medical treatment, presented with an asymptomatic nonulcerated lesion, at the lower posterior gingiva. The patient had periodontitis with periodical control and the intraoral exam showed a single, hardened nodule measuring 1 × 0.5 cm, with a smooth surface and sessile base, surrounding the interproximal distal space between the first and second left lower molars. Radiographically, there was no evidence of bone compromise. Pigmentation was only seen on the lingual area. An incisional biopsy was made, providing the diagnosis of melanoma with immunohistochemical positive reaction for HMB-45 and S-100. Chest radiograph and computer tomography (CT) scan of the cervical area was required to rule out any metastatic lesion; the results were negative. The patient underwent a mandibular and neck surgery showing 1 positive lymph node out of 37 sentinel lymph nodes. She received oncologic treatment with no recurrence after 3 years.

DIAGNOSIS AND TREATMENT OF JUVENILE NASOPHARYNGEAL ANGIOFIBROMA: PRESENTATION OF TWO CASES. *OSMAR ADÁN CÁRCAMO-IDIÁQUEZ, CARLOS MANUEL ROA-ENCARNACIÓN, DANIEL ALEJANDRO HERNÁNDEZ-CASTAÑEDA, ADOLFO NAVARRO-ZARATE, ISRAEL VIVANCO-PÉREZ, JOSÉ FRANCISCO TORRES-ANGUIANO and, DIEGO ACEVEDO-CANTORÁN*

Juvenile nasopharyngeal angiofibroma (JNA) is the most common locally aggressive benign tumor of the nasopharynx, presenting with an incidence in male adolescents of up to 1:150,000. The main symptoms of JNA include epistaxis and progressive nasal obstruction. Its diagnosis is based on clinical and radiologic findings. Open or endoscopic surgery is the treatment of choice and its rate of recurrence ranges from 13% to 46%. Two 13-year-old male patients presented with a history of progressive nasal obstruction and recurrent epistaxis. CT and magnetic resonance imaging (MRI) revealed a tumorous lesion that extends from the pterygopalatine fossa to surrounding areas. They were diagnosed with JNA II-C (case 1) and III-B (case 2) according to Radkowski. Embolization and subsequent surgical resection was performed. After 2 years of follow-up, the patients remain asymptomatic without recurrence. The nature of the JNA makes its treatment a challenge, which must be approached in a multidisciplinary manner to achieve results with lower morbidity and mortality.

WILLIAMS-BEUREN SYNDROME AND ORAL FINDINGS. *RODRIGO SOARES DE ANDRADE, SHIRLENE BARBOSA PIMENTEL FERREIRA, MELISSA MACHADO VIANA, RENATO ASSIS MACHADO, RICARDO DELLA COLETTA, MARCOS JOSÉ BURLE DE AGUIAR and, HERCÍLIO MARTELLI JÚNIOR*

Williams-Beuren syndrome (WBS; OMIM #194050) is a developmental disorder characterized by congenital heart disease, intellectual disability, dysmorphic facial features and ophthalmologic abnormalities. Virtually every organ and system can be affected in WBS as a result of haploinsufficiency. Most cases are sporadic, although familial cases with autosomal dominant inheritance have been reported. Oral abnormalities are also described in clinical manifestations of the disease. This study describes orofacial features in 17 patients with WBS. Patients with a confirmed molecular diagnosis of WBS were examined for oral abnormalities through clinical oral evaluations and panoramic radiography. Malocclusion, specifically with dental midline deviation, and high-arched palate were the most common oral findings. The present study contributes to the knowledge of orofacial manifestations in WBS. Since such patients with WBS may develop severe oral abnormalities, early detection and treatment can help to improve their quality of life.

METASTATIC CALCINOSIS OF THE TONGUE: A CASE REPORT. *AMANDA LEAL ROCHA, LAIZ FERNANDES MENDES NUNES, GLEYSON KLEBER AMARAL SILVA, SICILIA REZENDE DE OLIVEIRA, FELIPE PAIVA FONSECA, RICARDO ALVES MESQUITA and, TARCILIA APARECIDA SILVA*

Metastatic calcinosis (MC) is a pathologic process that results from the deposition of calcified product in normal tissues as result of hyperphosphatemia with or without concomitant hypercalcemia. A 52-year-old man with a history of renal transplantation was evaluated for an asymptomatic nodule on the dorsal surface of the tongue. On intraoral examination, an undefined, firm, sessile, irregular and yellowish surface nodule, measuring 10 × 8 × 4 mm was observed. Panoramic radiograph showed radiopaque areas adjacent to the hyoid bone and paired linear areas of calcification next to the mandibular angle. The medical history revealed a previous diagnosis of chronic renal disease with slightly increased levels of serum phosphorus (5.5 mg/dL). An excisional biopsy was performed. Histopathologic and scanning electron microscopy analysis revealed the presence of amorphous material and basophilic irregularly shaped acellular deposits with a lamellar-like aspect. A final diagnosis of MC was made and the patient was referred for medical evaluation. Financial support: FAPEMIG.

DENOSUMAB IN THE TREATMENT OF MAXILLARY CENTRAL GIANT CELL GRANULOMA: REPORT OF TWO NEW CASES. *ANDRÉ CAROLI ROCHA, ANDRÉ GUOLLO, SILVIA VANESSA LOURENÇO, MARCELO MINHARRO*