of variably dense fibrocollagenous connective tissue with small blood vessels and nerve bundles. S100 and CD31 immunohistochemistry showed expected positivity for nerve and vascular tissues. A microscopic diagnosis of simple bone cyst associated with the inferior alveolar canal was rendered.

Conclusion: This case represents an unusual simple bone cyst. Radiographically, the lesion appears to be associated with inferior alveolar canal. Even though simple bone cysts in the posterior mandible are not common, it is very unlikely to involve/arise from the inferior alveolar canal.

REGIONAL ODONTODYSPLASIA: A CASE REPORT.

MR. JOSE RAMOS[A], DR. ROBERTO ONNER CRUZ TAPIA[B], MS. ANDREA MESIAS-PEÑAHERRERA[B], DR. JAVIER PORTILLA-ROBERTSON[B]. [A] NATIONAL AUTONOMOUS UNIVERSITY OF MEXICO, [B] UNIVERSIDAD NACIONAL AUTÓNOMA DE MÉXICO

Objective: Report a case of regional odontodysplasia in the maxilla of a pediatric patient and the immunohistochemical expression of different types of collagen. Regional odontodysplasia is a rare developmental anomaly, involving the ectoderm and ectomesenchyme of the temporally and permanent teeth. It tends to be locallizated in only one arch of the jaws.

Case report: A 8-year-old female patient, with no significant hereditary or pathological history. On examination dental agenesis C, D, E is observed. Radiographically revealed 6, 7 and 8 with radiopaque contour and loss of the delimitation between enamel-dentin complex, giving an appearance of ghost teeth. Surgical treatment was performed. Microscopic examination follicular tissue contains scattered collection of enameled congregates and islands of odontogenic epithelium. Immunohistochemical expression of different types of collagens was heterogeneous in the dentin (col. 1,2,3,4,5,6,10 and 11). These results are consistent with an abnormal dentin development.

Conclusion: Regional odontodysplasia is an alteration that develops at a very early age, so the interdisciplinary management and the choice of treatment are fundamental since the treatment must be specific for each patient.

PALATE EPITHETIOD HEMANGIENDOTHELIOMA, CASE REPORT..

DR. YAMELY RUIZ[A], PROF. BEATRIZ ALDAPE[A], PROF. CARLOS LICEAGA[B], DR. LUIS MONTOYA[B], DR. CÉSAR OJEDA[B], DR. ANA MARÍA CANO[C]. [A] UNAM, [B] HOSPITAL JUÁREZ DE MÉXICO, [C] INSTITUTO NACIONAL DE CANCEROLOGÍA

Introduction: Epithelioid hemangioendothelioma (EHE) is considered as a borderline vascular neoplasm between hemangioma and angiosarcoma. It represents less than 1% of all vascular tumors and was described in 1975 by Dail and Liebow, but the term EHE was introduced in 1982 by Weiss and Enzinger. EHE is characterized by a proliferation of epithelioid endothelial neoplastic cells. This lesion is rare reported in oral cavity. Clinically, it presents as gingival swelling.

Case Report: 59 years old male presents with asymptomatic left palatal swelling of 3 years of evolution, the lesion was previously diagnosis as granular cell tumor by a hospital Pathologist. Excisional biopsy was done. Microscopically are epithelioid hyperchromatic cells with vacuolated cytoplasm and lumen formation, arranged in nests and closely associated with blood vessel. Neoplastic cells were positive for the CD31, CD34, D2-40, FVIII and INI1; Ki67<2% and negative for CKAE/CKAE3, S-100, langerina, vimentin, EMA, SMA and FLI1 markers. Tissue electron microscopy was performed and the diagnosis of epithelioid hemangioendothelioma was done.

Discussion: The EHE is an uncommon vascular neoplasm with less of 50 cases reported in oral cavity in the English literature. The most common location is gingiva, in middle age patients. Histologically, the presence of vacuolated cells may cause confusion in the diagnosis and therefore the use of other tools such as immunohistochemistry is important for the appropriate diagnosis of this lesion and correct treatment.

Conclusion: EHE can turn into malignancy and metastasize to regional lymph nodes, therefore wide margins surgical excision and long term follow up of the patient is highly recommended because the 10-15% rate of recurrence, the survival rate is 76% true 5 years of follow-up.

ADENOMATOID ODONTOGENIC TUMOR, THE REPORT OF THREE CASES.

PROF. BEATRIZ ALDAPE[A], PROF. CARLOS LICEAGA[B], DR. LUIS MONTOYA[C], DR. CESAR OJEDA[B], DR. CARLOS GARCIA[D]. [A] UNAM, [B] HOSPITAL JUÁREZ DE MÉXICO, [C] HOPSITAL JUAREZ DE MEXICO, [D] PRIVATE SURGERON

Adenomatoid odontogenic tumor (AOT) is a rare benign odontogenic tumor. AOT represents 3-7% of all odontogenic tumors. First described by Steensland in 1905 and later by Philipsen and Bin in 1969, AOT is an encapsulated tumor composed by odontogenic epithelium with duct-like structures. Radiographically, it commonly appears as a pericoronal unilocular radiolucency associated with an impacted tooth, more often the maxillary canine. Frequently, the lesion shows focal calcifications. Most cases are discovered in the second decade of life. Some authors have considered AOT as a hamartoma rather than a neoplastic process. A peripheral variant has been described. Here, we report three cases of AOT to illustrated the benign course of this tumor.

Cases: The three cases were found in females at the age of 15, 18 and 33 years. One case was discovered the mandible as periapical lesion and two cases associated with impacted maxillary canines. All cases show well-defined mixed radiolucent and radiopaque appearance. Root resorption was not observed in the mandibular case. Slow growing was reported in all cases. An excisional biopsy was done in the three cases. Microscopically, all cases revealed an encapsulated tumor compose of sheets of solid basaloid epithelium with duct-like spaces. Cystic and solid patterns with dystrophic calcification were also observed. No recurrence has been reported.

Conclusion: Although, the mandibular case was located in an uncommon location and showed an atypical appearance, all cases demonstrated an indolent behavior. These cases confirm the benign nature of this tumor.

CLEAR CELLS TUMORS IN THE ORAL CAVITY: TWO CASES TO SHOW THE CHALLENGING DIAGNOSIS.

DR. CATALINA GARCÍA, PROF. IRIS ESPINOZA, PROF. ANA ORTEGA-PINTO. UNIVERSIDAD DE CHILE

Introduction: Clear cell carcinomas in the jaws are very infrequent neoplasms. Differential diagnosis includes metastatic