Findings: Over a thousand cases of odontogenic tumors were diagnosed in the Oral and Maxillofacial Pathology Unit between 1971-2018. The cases were reviewed and reclassified histopathologically in accordance with the 2017 WHO classification of head and neck tumors. The most common three tumors were ameloblastoma (n:366, including unicystic and peripheral ameloblastomas), odontoma (n:335, both complex and compound), and odontogenic myxoma/fibromyxoma (n:190), respectively. Malignant and peripheral odontogenic tumors are a small proportion of this series. The mean age is about 32 and there is a slight female predilection. The most common site is molar region of the mandible, followed by the anterior mandible and the anterior maxilla.

Conclusions: This is one of the largest series of odontogenic tumors to be described from the Europe. The location, site, gender and age of the patients are similar to that in other populations, however there are some differences about the frequency of the tumors types.

THE IMPORTANCE OF EARLY RECOGNITION OF ORAL POTENTIALLY MALIGNANT DISORDERS IN HIV-AIDS INDIVIDUALS..

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Objective: An increase in head and neck cancer (HNC) in HIV-infected individuals has been described in several epidemiological studies, suggesting that immunosuppression, even in treated patients, may play a role in the development of HNC. A thorough oral examination is essential for the identification of potentially malignant lesions, particularly in individuals at high risk to develop cancer. Thus, we report two cases of oral potentially malignant disorders occurring in HIV individuals.

Clinical Presentation: Case 1. A 39-year-old male HIV + since 2013. In 2015 presented an asymptomatic, slightly granular, red/white pediculate tumor on the left buccal mucosa, clinically compatible with multifocal epithelial hyperplasia with post-traumatic hyperkeratosis (251 cells/ml CD4+, undetectable viral load [VL]). Two weeks later, the lesion showed marked erosive/ulcerated areas, thus, a complete excision was done. The final diagnosis was in situ squamous cell carcinoma positive to HPV-16. Case 2. A 40-year-old male HIV+ since 2005, with histologically confirmed oral hairy leukoplakia, immunohistochemistry showed positive expression to EBV and negative to HPV. In 2015 presented a white well circumscribed homogeneous plaque, with a slightly rough surface and some satellite lesions, comparable with the previous hairy leukoplakia. The patient referred itching and burning sensation, so an excisional biopsy was done, showing hyper orthokeratosis with moderate dysplasia. The sample was negative for EBV and HPV. Both patients have remained asymptomatic, without signs of recurrence.

Outcome: The present cases evidence that some oral potentially malignant disorders may resemble other common lesions in HIV-patients that could be underdiagnosed, delaying an appropriate management and impacting prognosis. It is essential to highlight that HIV/AIDS patients should be closely monitored. Oral examination should be cautious even in the presence of lesions with a benign appearance.

A CLINICO- EPIDEMIOLOGICAL, GENETIC AND MOLECULAR ANALYSIS OF FOCAL EPITHELIAL HYPERPLASIA (FEH).

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Objectives: FEH is a benign mucosal condition often presenting in female children. The Indian descendants in America, Eskimos in Greenland and Canada, the Nahuatl population in Mexico and Aboriginals in Australia are commonly affected populations while in Africa; cases have been reported from the Khoi San population in South Africa and from Ghana and Nigeria. Clinically, lesions may be localised or multiple, flat (Papillomatous) or raised (Papillonodular) and are more common on the lips and buccal mucosa

Material and Methods: An epidemiological demographic screening project between 2015-2017 was undertaken for FEH by the NRU, Khartoum, Sudan. This assessed 647 persons in the age groups 5−38 years living in the province of 'Kalakla' (North, West and East), an area with a high population of FEH presentation as determined by health statistical analysis, ministry of health. Clinical assessment was carried out in all persons and genetical and molecular HPV subtyping was carried out in 30% of the assessed population.

Findings: 77% of persons were 5-15 years, 14% were between 16-27 and 9% were between 28-38 of age. Of 647 persons, 147 persons were clinically diagnosed with FEH and the lips were the commonest area affected. Mean age of presentation was 14 years (range: 5 − 23), 27% of persons with FEH had a familial relation and 132/147 were female. 30/147 underwent PCR analysis and HPV 32 was the most common subtype, followed by 1,11,12 and 13. 3 persons had no evidence of HPV infectivity. Finally, 12/15 persons who underwent genetical analysis were positive for HLA DRB 1*0404 expression.

Conclusion: Persons with FEH and their relatives are greatly affected by the aesthetic, medical and traumatic concerns related with this condition. Differential diagnosis includes other viral lesions, epidermodysplasia verruciformis, dysplastic PUVA keratosis and syndromes such as Neurofibromatosis and Cowdens.

INTERFERON GAMMA (IFNΓ) ANTITUMOR EFFECTS ON ORAL CANCER CELLS ARE ACCOMPANIED BY ER STRESS RESPONSE MODULATION AND DSPP ACTIVITY SUPPRESSION.

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Objectives: Expression of proinflammatory cytokines in various malignant neoplasms is widely considered to represent a host immune response to control tumor development. Recently, the role of interferon gamma (IFNγ) in oral squamous cell carcinoma (OSCC) and its relation with endoplasmic reticulum (ER) stress pathways were investigated. Dentin sialophosphoprotein (DSPP) has been involved in malignant transformation, invasion and metastasis of OSCC. The present study examined the effects of IFNγ treatment on ER stress, Unfolded Protein Response (UPR) and calcium homeostasis regulating mechanisms and the potential interaction with DSPP in OSCC cells.