

Objectives: In recent decades, anti-angiogenic treatment strategy is well-described in cancer treatment including ovarian, colorectal, non-small cell lung cancers. Here, the anti-angiogenic activity of both Bevacizumab and Afibercept have been searched on ten previously established primary Oral Squamous Cell Carcinoma (OSCC) cells of an Iranian population with different purity, searching for the most effective anti-angiogenic targeted drug.

Findings: To investigate and compare the effect of Bevacizumab and Afibercept on Vascular Endothelial Growth Factor (VEGF) secretion of ten primary OSCC cells, cell proliferation and viability was assessed by ELISA and MTT assays. Also, cell migration was studied using scratch assay.

The results showed that VEGF impressively expressed in all primary cancer cells. Although both drugs significantly reduced the secretion of VEGF, the effect of Afibercept was more prominent. Also, Bevacizumab-treated cells migration was lower than the control group and the cells treated with Afibercept showed the lowest migration rate comparing with Bevacizumab and control groups.

Conclusion: The anti-angiogenic targeted drugs could probably be used in treatment of the patients with OSCC in combination with conventional surgical treatments.

PRIMARY MANDIBULAR UNDIFFERENTIATED SARCOMA. A CASE REPORT. *MS. IRIS PÉREZ-DE LEÓN^A, DR. ROBERTO ONNER CRUZ TAPIA^B, DR. JAVIER PORTILLA-ROBERTSON^A, MS. JANEET GARDUÑO-BECERRA^C, DR. DANIEL LÓPEZ-ZUÑIGA^C, DR. LUIS FERNANDO JACINTO ALEMÁN^A, DR. KARINA OLIVARES-MONTAÑO^C, MS. ITALÚ VELASCO^C.* ^A UNIVERSIDAD NACIONAL AUTÓNOMA DE MÉXICO, ^B UNIVERSIDAD NACIONAL, ^C HOSPITAL GENERAL DE MÉXICO "DR. EDUARDO LICEAGA"

Objective: To present a primitive monophasic sarcoma of the mandible in a young male with spindle-cell predominant component and non-specific immunohistochemical phenotype. Uncertain origin sarcomas are a very complex and heterogeneous group of neoplasms, categorized by their undetermined histogenesis and peculiar morphological features; generally associated to a specific translocation. This type of sarcomas has not sufficient clinical and diagnostic information because its low frequency in this site.

Case report: A 23-year-old male presented with slow-progressive mobility and tooth loss associated with gingival enlargement in the third quadrant. Local examination showed a firm mass of approximately 5 × 4 cm in the body of the mandible. X-ray examination revealed an extensive ill-defined radiolucency on the left side of the mandibular body. CT-scan assessed bone and soft tissue infiltration. Hemimandibulectomy was performed and gross examination consisted of a solid nodular mass. Microscopically a monotonous spindle-cell lesion with fascicular pattern was observed, hypercellular areas and hemangiopericytoid-like vessels were the predominant component. The neoplastic cells displayed pleomorphic nuclear features with vesicular chromatin. A wide immunohistochemical panel was performed showing reactivity for Calponin, CD68, CD99, Bcl-2, TLE-1, NSE, FLI-1, WT1, PTEN and 40% Ki67 index.

Conclusion: Despite of the high sensitivity, antibodies are not conclusive for an accurate diagnosis. Molecular

techniques were required to establish this entity with great implication in patient management. Complete assessment of undifferentiated sarcomas should include clinical/radiological correlation, histopathology, immunohistochemical staining and genetic confirmation.

SUBGEMMAL NEUROGENOUS PLAQUE: REPORT OF 11 CASES AND REVIEW OF THE LITERATURE. *DR. PAVNEET TAK, DR. ANNA TRZCINSKA, DR. BRANDON VEREMIS, DR. MOLLY COHEN, DR. NAOMI RAMER.* MOUNT SINAI HOSPITAL, NEW YORK

Objective: Subgemmal neurogenous plaques are subepithelial neural structures usually located along the posterolateral border of the tongue. Often associated with the taste buds, they are mostly asymptomatic, but occasionally patients present with pain or a burning sensation. Our objective for this study is to assess previous cases of this entity and contribute eleven new cases to the literature.

Findings: We performed a retrospective analysis of the archived cases from the Department of Pathology, The Mount Sinai Hospital, New York. A detailed search was performed using the PowerPath (Sunquest) laboratory information system, which consisted of a review of all cases received from the year 2013 to 2017. 11 cases were found to be diagnosed as subgemmal neurogenous plaque. All cases were located in the tongue. The lesions showed a female predilection with a mean age of 51.7 years. These findings are consistent with previous published studies. In cases with S-100 immunohistochemical staining (8/11), S-100 confirmed the diagnosis. According to the clinical histories provided, the majority (6/11) were asymptomatic, mass-forming lesions, two cases were red/white lesions with no associated pain or burning sensations, one case presented as tongue pain and two cases lacked clinical information.

Conclusion: Subgemmal neurogenous plaque is a common entity which has been previously misinterpreted as a neurofibroma, neuroma, ganglioma and even squamous cell carcinoma. Proper diagnosis requires histopathological examination. It is important to create awareness among current students and residents in addition to practicing pathologists about this entity. Our study is consistent with other studies performed to date and contributes a further reinforcement and addition to the current literature. We also recommend a larger and more diversified study of this entity for the future.

A COMPARATIVE STUDY OF ORAL HEALTH STATUS IN DIABETIC AND NON-DIABETIC PATIENTS. *DR. BUKOLA ADEYEMI^A, DR. OLUWATOYIN ABIMBOLA^B, DR. BAMIDELE KOLUDE^A.* ^A UNIVERSITY COLLEGE HOSPITAL/UNIVERSITY OF IBADAN, ^B UNIVERSITY COLLEGE HOSPITAL, IBADAN

Objective: This study compares the prevalence and awareness of oral features in diabetic and nondiabetic groups.

Findings: A total of 111 (84.09%) diabetics had features associated with diabetes mellitus; male: female ratio was 1.05:1. Prevalent oral features were periodontitis 81 (61.36%), xerostomia 48 (36.36%) and halitosis 46 (34.85%). Candidiasis was only seen in 10 (7.58%) patients. Diabetic neuropathy was seen in 60.6% of cases as xerostomia, hypo-salivation and burning mouth. Prevalence of oral features of diabetes mellitus increased

with duration of diabetes mellitus. Majority of patients with oral lesions were above the 5th decade of life. Only 13(11.7%) of the patients with oral features of diabetes mellitus had average fasting blood glucose within the normal range.

Significant oral features of diabetes mellitus found in control cases were hyposalivation ($\chi^2 = 49.531$, $df=1$, $p<0.05$), Burning mouth; ($\chi^2 = 5.587$, $df=1$, $p<0.05$), Halitosis ($\chi^2 = 13.384$, $df=1$, $p<0.05$), Coronal caries ($\chi^2 = 14.937$, $df=1$, $p<0.05$) and Periodontitis; ($\chi^2 = 24.383$, $df=1$, $p<0.05$).

A total of 105 cases (79.5%) and 95 (72.0%) control subjects were unaware that diabetes mellitus has oral manifestations, 19 cases (14.3%) and 33 (25%) controls were able to name at least one oral feature of diabetes. Cases having higher awareness (>3 oral features) had significantly better mean glucose level. Awareness was unrelated to educational level of cases but directly related to education of controls.

Conclusion: There was significant difference in oral features among diabetics compared to control and features were directly proportional to glycemic as diabetics with poor glycemic control showed more oral features than those that attained euglycemic status. Overall, there was low awareness of oral features of diabetes amongst study cohort which was worse amongst diabetics compared to control.

PRIMARY XANTHOMA OF THE MANDIBLE: A CASE REPORT OF A RARE ENTITY.. DR.

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Objective: Central xanthoma of the jaw is an extraordinarily rare entity with less than 30 cases reported in the English literature so far. This benign lesion is often associated with endocrine and metabolic diseases (e.g. hyperlipidemia, diabetes mellitus, etc.). When those conditions are ruled out, primary xanthoma of the jaw is the appropriate diagnostic term. Adult males are most commonly affected, and the lesion is most frequently reported in the mandible. The classic microscopic features include the presence of histiocytic-like cells with foamy cytoplasm that stain positive by immunohistochemistry for CD68, but are negative for S100 and CD1a. Due to the microscopic similarities of histiocytic-like cells in H/E slides, Erdheim-Chester disease and Rosai-Dorfman disease are two systemic conditions that should be considered in the work-up.

Findings: We present a case of a 15 years-old male patient with multiple, ill-defined, non-corticated, radiolucent entities in the left ramus of the mandible. The lesions appear to be coalescing in some views. There is no evidence of bucco-lingual expansion and cortical destruction of bone. An excisional biopsy is performed. Microscopic examination reveals mixed soft and hard tissues. The hard tissue is composed of reactive vital bone. Sheets of foamy cells with dark, centrally placed vesiculated nuclei, prominent nucleoli and well-defined cytoplasmic membrane are noted between the bony trabeculae. In some areas, epithelioid cells with more amphophilic cytoplasm and less distinct cytoplasmic membrane are identified. Chronic inflammatory infiltrate with extravasated erythrocytes within the background of the connective tissue is also observed.

Conclusion: The appropriate diagnosis of central xanthoma of the jaw requires the work-up for systemic diseases in

association with immunohistochemical profile. The recommended treatment is excision and curettage, which has been associated with excellent prognosis and extremely low recurrence rate.

CANDIDA SPECIES AND STRAINS IN THE ORAL CAVITIES OF THE ELDERLY: A COM- PARISON BETWEEN PEOPLE IN HOME- BASED CARE AND IN AGED-CARE FACILITIES. DR.

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Oral candidiasis is prevalent in the elderly population due to medical conditions, use of systemic medications and the presence of oral appliances such as dentures. It is uncertain whether residing in an aged-care facility contribute to Candidacarriage and has an impact on the Candida species or strains colonizing elderly patients.

Objective: The aim of this study was to investigate the presence and abundance of Candida species and strains in saliva and from the oral mucosal swabs and smears of people living in institutional rest homes and those living at home.

Findings: A higher proportion of elderly people living in rest homes had PAS+Candida hyphae present in smears (9/25, 36%) compared to those living in their own home (5/21, 24%). CFU were present in 17/25 (68%) palatal swabs, 20/25 (80%) tongue swabs and in saliva from 21/25 (84%) of elders living in rest homes compared with 4/21 (19%) palatal swabs, 6/21 (28%) tongue swabs and from saliva in 12/21 (57%) of elderly living in their own home.

Conclusion: The results indicate that elderly people living in aged-care facilities are more likely to have Candidahyphae detected on PAS stained smears and have a higher Candida carriage rate compared to elderly living at home. This may be due to the presence of co-morbidities which led to the need for residential care and/or may be related to the rest home environment.

LUNG CARCINOMA METASTASIS TO THE MAXILLA AFTER RECURRENT IMPLANTS FAILURE. DR. SAVERIO CAPODIFERRO^A,

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Metastatic tumours involving the oro-facial tissues are infrequent, with an incidence ranging between 1-8% of oral malignant tumours. The peak incidence is in the 5-7th decades and they can be the first sign of an occult cancer or manifest during the follow-up of a patient with a known primary tumour.

We describe a case of metastasis from unknown lung adenocarcinoma occurring in the maxilla, around dental implants, causing recurrent implants failure. A 62 year-old male without relevant clinical history was referred for dental implant failure in the left maxilla. New dental implants were positioned in the same maxillary area, but an additional implant failure occurred one month later; implants removal with an accurate bone curettage was performed and the surgical sample sent for histological