

Imaging Sciences Interesting Cases

CASE 419

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CLINICAL PRESENTATION: A 26-year-old female with sickle cell disease presented with clinical question of sinusitis and maxillary pain. A plain film series of the paranasal sinuses was ordered.

IMAGING FINDINGS: See figure legends.



Figure 1: AP radiograph of the head reveals unerupted mandibular supernumerary incisors in an adult. Magnified view with arrow.

DIAGNOSIS: Supernumerary teeth in the mandible

DISCUSSION: Plain radiographs of the face are insensitive for paranasal sinus disease, though small left maxillary fluid was identified in this patient. Of interest, the patient has bilateral unerupted mandibular



Figure 2: Lateral radiograph of the head reveals unerupted mandibular well-formed supernumerary incisors in an adult.

supernumerary incisors.

The most common location for supernumerary teeth is within the maxilla, specifically mesiodens, which is an anterior midline maxillary tooth. Supernumerary teeth may be found in any portion of the dental arches with an incidence of 0.8% of primary dentitions and in 2.1% of permanent dentitions. Multiple etiologies exist for supernumerary teeth, including hereditary and non-hereditary factors. Multiple associated syndromes are known, including cleft palate/lip, cleidocranial dysplasia, and Gardner syndrome.

The following is an excerpted table from Gamuts in Radiology:

GAMUT FOR SOLITARY OPACITY IN THE JAW, NOT NECESSARILY CONTACTING TEETH, COMMON

1. Bone island; osteoma; 2. Cemento-osseous dysplasia (focal); 3. Complex odontoma; 4. Condensing or sclerosing osteitis; 5. Idiopathic osteosclerosis; 6. Ossifying subperiosteal hematoma; 7. Osteomyelitis, chronic (pyogenic with sequestrum; Garré's sclerosing osteomyelitis); 8. [Periapical cemental dysplasia; sclerosing cemental masses] - these are mimics; 9. Retained tooth root; 10. Tori; exostosis; and 11. Unerupted, impacted, or supernumerary tooth.

Supernumerary teeth can cause symptoms related to failure of eruption, displacement, crowding, dentigerous cyst formation, and increased complexity of planned oral surgeries (e.g. implants or grafting). Alternatively, supernumerary teeth may be asymptomatic, as in this patient. Extraction is curative, but monitoring is considered when there is no active pathology and the teeth are discovered incidentally, as in this case.

REFERENCES:

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