



Mucocele Formation After Wisdom Teeth Removal: A Case Report

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Abstract

Mucoceles are common, mucin-filled small sacs in the oral cavity that may be several in size. Generally, they occur after traumas. Mucoceles usually occur in children and adults. Majority of the mucoceles are of minor salivary gland origin. They can the surrounding tissues despite their benign nature. A twenty nine-year-old female patient was admitted to our polyclinic with swelling and mild pain complaints on the right back region inside her mouth since one year. She had a impacted wisdom teeth removal history two years ago. Her story and clinical appearance of the lesion helped us diagnose the lesion as a mucocele. Here we present this case because, to our knowledge, there is no reported mucocele after wisdom teeth removal in the literature.

Key Words: Mucocele; Wisdom Teeth Removal; Oral Cavity.

Yirmi Yaş Dişi Çekimi Sonrası Oluşan Bir Mukosel Olgusu

Özet

Mukoseller, ağız içinde sık görülen, farklı boyutlarda olabilen münin dolu küçük keseciklerdir. Genellikle travma sonrası meydana gelmektedir. Çoğunlukla genç erişkinlerde ve çocuklarda görülür. Mukosellerin büyük bir kısmı minör tükürük bezlerinden kaynaklanır. İyi huylu olmalarına rağmen, kemik erozyonuna yol açarak komşu dokularda baskıya neden olabilirler. Yirmi dokuz yaşında bayan hasta, polikliniğimize ağız içinde sağ arka tarafta yaklaşık bir yıldır olan şişlik ve hafif ağrı şikayeti ile başvurdu. İki yıl önce aynı lokalizasyondan yirmi yaş gömülü diş operasyonu geçirdiğini belirtti. Hastanın öyküsü ve lezyonun klinik görünümü nedeniyle mukosel tanısı konuldu. Literatürde şuan ki bilgimize göre yirmi yaş dişi çekimi sonrası bildirilen mukosel olgusu olmaması nedeniyle sunulması uygun görülmüştür.

Anahtar Kelime: Mukosel; Yirmi Yaş Dişi Cerrahisi; Oral Kavite.

INTRODUCTION

The word mucoceles, used to imply common soft tissue lesions of the oral cavity, literally means cavity filled with mucus (1,2). It arises in the form of two cases: extravasation and retention. The one developed by salivary gland is called the retention mucocele while extravasation mucocele is used to indicate the kind of mucocele created by the spread of the secreted mucus towards surrounding tissues due to rupture in the excretory ducts of the salivary glands (3).

Extravasation, the most common etiologic factor, usually goes with local trauma and irritation. Because there are no true epithelia of these cysts, they are not included in the cyst family. Generally observed in the lower lip, in the lateral to the midline, they are also rarely seen in the sublingual or buccal regions, or in the mucosa of the hard palate (1). The following is a case report of a mucocele observed on the sutured area following the extraction of wisdom tooth of a patient.

CASE REPORT

A twenty-nine year old female patient was admitted to our clinic with complaints of swelling and pain in the right posterior region in the mouth (Figure 1). She stated that her complaints started about a year ago. A year

before the start of the complaints, she had undergone an impacted tooth operation in the same localisation. In her story, she related that the swollen region discharged intermittently, causing her complaints to repeat. Dermatological examination translucent cystic lesion of about 0.5 cm in diameter in the right retromolar region. In the light of the patient's history and the physical examination findings, the patient was diagnosed with mucocele. Because the mucocele did not cause any additional complaints and the patient did not accept surgical excision, we did not apply treatment but started to monitor the patient.



Figure 1. Semi-opaque sac 0.5 cm in diameter in the right retromolar region.

DISCUSSION

Mucocele usually follow injuries in the minor salivary glands after traumas. Biting and shock are the most common forms of trauma. It is mostly seen in young adults and children. It has been reported that 70% of mucocels are caused by the minor salivary glands and formed in the lower lip. Lesions may spontaneously have periodic swelling and tearing. It has also been reported that especially superficial mucoceles are closely associated with Graft Versus Host disease and Sjögren's syndrome. In chronic cases, fibrosis formation may develop instead of cystic formation (1,4,5).

Although clinically the sizes vary from a few millimetres to several centimetres in diameter, larger lesions have also been rarely reported. Kahveci et al. has reported the case of a 42 year old female patient with a buccal mucous retention cyst of 7 cm in diameter (6). In our case, lesion was a few millimeters in size.

Mucocele are usually single formations but they are rarely seen in a large numbers as well. Such lesions often occur due to thermal irritation resulting from continuous and intense exposure of smoking (1). Our patient had only one lesion and had no history of tobacco use. Although the diagnosis of mucoceles may mostly be clinical, histopathological examination is also required for definitive diagnosis. Differential diagnosis is made up of lymphangioma, hemangioma, lipoma, mucoepidermoid carcinoma, and lymphoepithelial cysts (1). In the case presented, because the patient refused to undergo the biopsy, the diagnosis was made clinically.

Trauma is one of the most common etiologic factors. Operations patients had in the past are also among the risk factors. Santos et al. reported a large extravasation mucocele case holding the ventral surface of the tongue after lingual frenectomy (7). In our case, we observed

mucocele development in the sutured area after the extraction of wisdom teeth. Selecting the treatment method of the mucoceles, lesion size, localisation, and adjacent anatomical structures are taken into account. Excision, electrosurgery, etching with lineoic acid, or CO2 laser vaporization methods can be used in the treatment (1,8,9). In our case, because of the lesion location, size, and the fact that it was not causing any discomfort, we did not apply any treatment and put the patient on the follow-up list.

There are no reported mucocele cases after the extraction of wisdom teeth in the literature but, to draw attention to the possibility of mucocele formation after dental surgery, we think that this was a noteworthy case.

Presented as a poster at the XXI. Lütü Tat Congress in Ankara on 13-17 November 2013.

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Received/Başvuru: 11.10.2013, Accepted/Kabul: 13.12.2013

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For citing/Atıf için

Sarac G, Altunisik N, Demirdag HG, Sener S. Mucocele after wisdom teeth removal: a case report. J Turgut Ozal Med Cent 2014;21:233-4. DOI: 10.7247/jtomc.2013.1431