

A Case of Squamous Cell Carcinoma in the Mandibular Gingiva,  
Whose Treatment Was Delayed, because No Definitive Diagnosis  
Was Obtained by the First Biopsy

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A malignant tumor in the gingiva is one of the most notable diseases in everyday dental practice. Squamous cell carcinoma is similar to periodontitis and stomatitis in terms of gingival swelling and ulcer formation, and thus we often experience difficulty in distinguish. Here we report a case of squamous cell carcinoma in the lower gingiva, whose treatment was delayed, because the first biopsy did not lead to a confirmed pathological diagnosis though we had suspected it. The patient was 54-year-old woman complaining of a pain in the right lower gingiva. Gingival carcinoma was suspected based on irregular gingival swelling. The pathological diagnosis by the initial biopsy was inflammatory granulation tissue. We performed curettage of the inflammatory tissue and used the tissue for the second biopsy. The result showed well-differentiated squamous cell carcinoma. We performed tumor resection with segmental resection of mandible, right radical neck dissection, and mandibular reconstruction with a titanium plate. The metastasis existed in 10 lymph nodes of the right cervical sample. Postoperative chemoradiation was performed, and there is currently no sign of recurrence or metastasis.

Key words : squamous cell carcinoma, differential diagnosis, inflammatory granulation tissue

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