

Images for Diagnosis

Hemorrhagic complication of jaw lesion: a diagnosis challenge!

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A 66-year-old man was referred for repeated oral bleeding accidents during the past two months.

Clinical examination showed a right jugal swelling, an exuberant vestibular clot and mobility of adjacent teeth (14, 16 and 17). Puncture of the lesion revealed hematic content. Cone-beam CT analysis showed a well-defined right maxillary osteolytic lesion, blowing out the vestibular cortex and the sinus floor. Root resorption of tooth 16 was also evidenced.

A vascular lesion or an aneurysmal cyst were suspected. The vascular component was discarded by MRI and arteriography. The diagnostic of an intraosseous hematoma due to a blood disease was also ruled out after biological analysis, thereby allowing its surgical removal. The diagnosis retained was a radicular cyst complicated by bleeding.

Hemorrhagic accidents on benign jaw cysts are unusual complications making diagnosis difficult. Hemorrhagic

manifestations are suggestive of vascular lesions whose diagnosis must be discarded to avoid any bleeding complications during surgery.



Fig. 1. Clinical picture showing the exuberant vestibular clot.

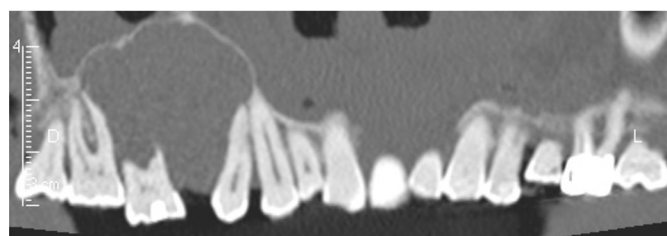


Fig. 2. Cone-Beam CT analysis: maxillary osteolytic lesion of 4 cm in long axis.

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