A 51-year-old completely edentulous female presented with a complaint of blackish discoloration on her upper front jaw region in the last 6 months. It started as a small mark and has gradually grown to its current size. Intraoral examination revealed blackish pigmentation in the maxillary anterior region extending from 13 to 23 region (Fig. 1), and patchy dark pigmentation on the hard palate (Fig. 2). On palpation, the area exhibited a slightly raised, irregular surface, with mild tenderness. Based on the clinical examination a provisional diagnosis of oral malignant melanoma was given. Biopsy was advised which confirmed the diagnosis. If a clinical assessment cannot definitively confirm the benign nature of an oral pigmentation, a biopsy is essential. However, conducting fine needle aspiration or exfoliative cytology on primary pigmented lesions is not advisable as it poses a risk of unintentionally spreading cancerous cells to surrounding tissues, the bloodstream, or lymphatic system. This heightens the possibility of local recurrence, regional, or distant metastasis. Although this lesion is a rare entity, it can be aggressive if undetected. Hence, oral physicians should be skilled enough to detect the lesion in early stages as early diagnosis and treatment increases the cure rate with a good prognosis.

Conflict of interest

The authors declare that they do not have any conflict of interest.