



IMAGES IN OTORHINOLARYNGOLOGY

Odontogenic keratocyst

Queratoquist odontógeno

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Odontogenic keratocysts are cysts originating in the areas of dental support of the maxillae, characterized by aggressive behaviour and a high potential for recurrence; they represent 3.1%–21.8% of maxillary cysts.

They are usually asymptomatic until they reach a large size or become infected, and they occasionally cause paresthesias in the lips and teeth. They can be single or multiple (the Gorlin-Goltz or basal cell nevus syndrome should be ruled out), and in most cases it is a radiographic finding. It has been related to the development of an ameloblastoma or carcinoma, thus it has been suggested that it represents a low-grade neoplasia.

Treatment is surgical excision with a safety margin and, occasionally, cryotherapy or application of chemical substances (Carnoy solution). The prognosis is reserved, due to the high rate of recurrence (between 5% and 62.5%), and monitoring is required for the first 5 years.

We present images from a female patient complaining of painful left gingival swelling, followed by mild discomfort over a period of 2 years; the examination revealed a hard, purplish protrusion covered with normal-looking mucosa (Figure 1).

The computerized tomography shows a large cystic formation eroding the upper left maxillary bone and, as in the orthopantomography image, there is a canine included in the maxilla (Figure 2). The cyst with the canine are enucleated and removed through a dual approach: Caldwell-Luc surgery and CENS. Today, 2 years later, she remains asymptomatic.

Conflict of interests

The authors have indicated there is no conflict of interest.



Figure 1 A purplish cyst can be observed in the left gingival region.

Figure 2 The orthopantomography shows a canine inserted in the dental support of the maxilla.

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