

Squamous Papilloma

Dr. Poosa Manasa

Dept of oral medicine and radiology, Meghna institute of dental sciences, Nizamabad, Telangana, India

Case Report

*Corresponding author

Dr. P. Manasa

Article History

Received: 06.08.2018

Accepted: 14.08.2018

Published: 30.08.2018

DOI:

10.21276/sjds.2018.5.8.2



Abstract: Squamous papillomas are common lesions of the oral mucosa with predilection for mucosa of hard and soft palate. As an oral lesion, it raises concern because of its clinical appearance, which may mimic an epithelial malignancy such as verrucous carcinoma or condyloma acuminatum. The purpose of this report is to make the public health community aware of this rare group of verrucous exophytic mass, which mimic exophytic carcinoma, verrucous carcinoma or condyloma acuminatum. Even, the lesion is benign in nature but also has a small risk of malignant transformation. **Keywords:** Alveolar mucosa, exophytic growth, human papilloma virus, papilloma.

INTRODUCTION

Squamous papillomas are common lesions of the oral mucosa with a predilection for the mucosa of the hard and soft palate including the uvula and the vermilion of the lips. It is an innocuous lesion that is neither transmissible nor threatening. As an oral lesion, it raises concern because of its clinical appearance. Here we report a case of patient with oral papilloma who stepped into our department for the treatment because he was afraid of its appearance fearing of any malignant lesion.

CASE REPORT

A 24 year old male patient reported to the department of oral medicine and radiology with a chief complaint of chief complaint of a growth on the palatal gingiva irt 16 since 1 month, patient was apparently asymptomatic before 1 month, then he noticed a growth which was gradual in onset and slowly progressed to present size, with no other associated symptoms.

His past dental and past medical history were insignificant. All the vital signs were within the normal range. The extraoral examination did not reveal any abnormality. On intra oral examination a solitary sessile exophytic papillary growth was seen on the marginal gingiva palatally irt 16 measuring approx less than 1x1cms in diameter with ill-defined borders, irregular in shape.

No other secondary changes like bleeding and pus discharge seen. On the palpation the lesion was soft in consistency, non-tender, rough, non-scrapable (fig 1)

.On the basis of clinical examination, a provisional diagnosis of verruca vulgaris was made. Excisional biopsy was done and the H and E section revealed thin elongated finger like projections lined by thin parakeratotic acanthotic stratified squamous epithelium pronounced basilar hyperplasia with mitotic figure and connective tissue core with blood vessels. The rete ridges were broad and were at the same level as adjacent epithelium constituting the supporting stroma suggestive of squamous papilloma. A 1-year follow-up was performed, and there was no evidence of recurrence of the lesion (fig 2).



Fig-1: showing oral papilloma



Fig-2: showing post-operative picture

DISCUSSION

Squamous papillomas are asymptomatic benign exophytic proliferations that occur in the oral cavity[1]. The most common site of occurrence is hard and soft palate mucosa, dorsum and lateral borders of tongue, uvula, gingival, lower lip, and buccal mucosa[2]. Human papillomaviruses (HPV) viruses are DNA viruses that are involved in the causation of these lesions and premalignant lesion such as leukoplakia, verrucous carcinoma, condyloma acuminatum, and cervical cancer[3].

The association between HPV and squamous cell lesions was first described by Syrjänen *et al.* in 1983. Papilloma viruses are members of the Papillomavirus family and belong to species Papovaviridae. Papillary lesions have a cauliflower like surface of which few may be pedunculated others are sessile. These lesions may appear single or multiple, or diffusely involve broad areas of the oral mucosa. They occur at any age[4].

Oral mucosal papillomas are mildly contagious and transmission requires direct mucosal contact.

Squamous papilloma is the most common benign epithelial neoplasm of oral epithelium. Papillomas most commonly occur on the palate in the oral cavity accounting for 34%, but may also affect the uvula, tongue, lips and gingiva. Nonkeratinized lesions appear coral pink whereas keratinized lesions appear as white. Surgical removal is the treatment of choice and can be performed with electrocautery, cold-steel excision, laser ablation, cryosurgery, or intralesional injections of interferon [5].

CONCLUSION

An early clinical diagnosis as well as histopathological examination of these lesions is important because of their association with oral dysplasias and carcinomas.

REFERENCES

1. Rajendran R. Benign and malignant tumors of the oral cavity. In: Rajendran R, Sivpathasundhram B, editors. Shafer's Textbook of Oral Pathology. 6th ed. New Delhi: Reed Elsevier India Pvt. Ltd.; 2006. p. 80-218.

2. Abbey LM, Page DG, Sawyer DR. The clinical and histopathologic features of a series of 464 oral squamous cell papillomas. *Oral Surgery, Oral Medicine, Oral Pathology*. 1980 May 1;49(5):419-28.
3. Hedich H. Oral cavity Premalignant or *in-situ* conditions dysplasia. Available from: <http://www.pathologyoutlines.com/topic/oralcavitydysplasia.html>. [Last cited on 2013 Nov 24].
4. Syrjänen K, Syrjänen S, Lamberg M, Pyrhönen S, Nuutinen J. Morphological and immunohistochemical evidence suggesting human papillomavirus (HPV) involvement in oral squamous cell carcinogenesis. *International journal of oral surgery*. 1983 Dec 1;12(6):418-24.
5. Jaju PP, Suvarna PV, Desai RS. Squamous pailoma: case report and literature review. *International Journal of Oral Science*. 2010;2(4):222-5.