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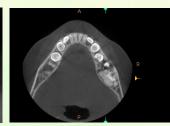
A 10-year-old girl visited the Pediatric Dentistry clinic, and a panoramic radiograph unveiled a radiopaque mass in the lower left mandibular region, and intraosseous retention of tooth 3.6. Surgical removal of the odontoma was performed under general anesthesia due to the case's complexity. The impacted tooth was not extracted to avoid the risk of intraoperative mandibular fracture. Its incomplete root formation suggested favorable spontaneous eruption.



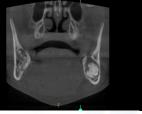


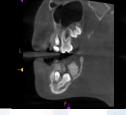


































The eruptive path of the impacted tooth has been monitored clinically and radiographically. One year after the intervention, favorable alterations of the original position were observed, including a higher placement. Four years later, we observe the tooth spontaneously positioned correctly in the dental arch, aligned with the occlusal plane. This indicates a successful resolution of the case, without requiring any additional surgeries or orthodontic interventions. In some cases, we should give nature a chance and await spontaneous resolution, with close monitoring of the case. Due to the potential of favorable progression, we can avoid the necessity of more complex and unecessary interventions.

Odontomas are not commonly encountered in clinical practice and 16% to 61% are often associated with permanent tooth impaction. Therefore, early diagnosis and appropriate management are crucial.