

MULTIPLE MESIODENS AND IMPACTED PERMANENT CENTRAL INCISOR - CLINICAL CASE

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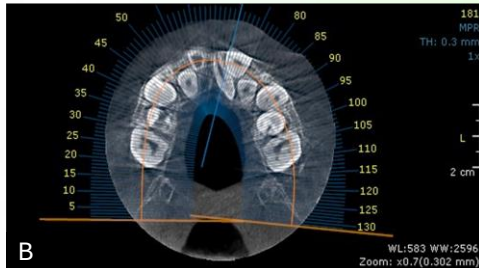


INTRODUCTION

Among dental anomalies, supernumerary teeth are the one that most affect the deciduous and mixed dentition. It is believed that supernumerary teeth are related to disturbances in the initiation and proliferation stages of tooth development. Males are more affected than females, in a 2:1 ratio. They occur more frequently in the maxilla than in the mandible and the most common supernumerary tooth is the mesiodens, located in the anterior midline of the maxilla. Mesiodens are mostly found in a single form, but may rarely occur in multiple forms, uni or bilaterally. This case report describes a rare case of multiple mesiodens.

DESCRIPTION OF THE CASE REPORT

A 7-year-old male patient was referred to a university dental clinic for an assessment of a supernumerary tooth. After an intraoral clinical examination, orthopantomography (Fig. A), periapical radiography and CBCT (Fig. B, C) two mesiodens were found: one impacted and inverted and the other erupted. The treatment plan involved the extraction of teeth 51 and 62, simultaneously with the two mesiodens (Fig. D, E, F), and the ulectomy of tooth 21, performed under minimal inhalational sedation with a mixture of nitrous oxide and oxygen, in addition to local anesthesia. Before the procedure, the patient received antibiotic coverage - Amoxicillin (45mg/kg/day - 8 days). The post-surgery period was uneventful (Fig. G - Follow-up 7 months, Fig. H - Follow up 1 year).



DISCUSSION

Clinical repercussions suggestive of the presence of a mesiodens are: asymmetrical eruption pattern of the upper incisors, delayed eruption of the upper incisors, excessive retention of the deciduous incisors, ectopic eruption of an upper incisor or spontaneous eruption of the mesiodens.

Complications of supernumerary teeth may include: delay or loss of eruptive potential of the permanent tooth, crowding, resorption of adjacent teeth, development of dentigerous cyst, ossification of the pericoronal space and crown resorption. Early diagnosis and appropriate treatment are essential to prevent and avoid complications.

The treatment of choice for this pathology is exodontia, which should be carefully planned, minimizing the risk of iatrogenic injuries associated with the surgical removal of supernumerary teeth.

CONCLUSION

Early diagnosis of supernumerary teeth is crucial to prevent complications. The planning of the surgical approach must be based on the most appropriate complementary methods of diagnosis, as a way of ensuring a more conservative approach.

