
Differential Diagnostics and Assessment of Cystic Translucencies of the Jaws

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Summary

Cystic translucencies of the jaws are more or less clearly circumscribed, oval or round, solitary or multiple translucencies in the bone with straight or wavy edges. As they are most frequently caused by cysts diagnosis of such lesions is usually simple. Occasionally pathological lesions are hidden behind such conditions, creating diagnostic difficulties, and consequently adequate knowledge and experience are required for diagnosis, and at the same time awareness that a mistake is occasionally possible. Namely, the correct diagnosis enables the correct choice of surgical treatment or choice of some other method of treatment, depending on the nature of the lesion. Pathological lesions which create translucency may be: odontogenic or nonodontogenic cysts, pseudocysts, odontogenic tumours without calcified tissue, gigantocellular jaw lesions, ectopic position of the salivary gland tissue, benign nonodontogenic tumours, such as desmoplastic fibroma, hemangioma or neurinoma, localised forms of histiocytosis X, osseous lesions in certain syndromes, some diseases of organic systems, and even primary malignant tumours of the jaws or metastases of other malignant tumours of the body. Restricted translucency in the jaws can be induced by dental germs prior to their calcification, variation in the trabecular structure of spongy bones and focally osteoporotic bone defects, impaired bone healing after tooth extraction, including so-called paraffinoma or myospherulosis, connective healing of the bone cavity after surgical procedures and finally translucencies which are the result of the anatomic structure of the jaws.

The object of the lecture is to warn of the diversity of radiographic idiosyncrasies by showing examples of typical and atypical X-rays, particularly the specificity of radiographic findings which predict aggressive growth of formations or greater tissue potential.

Ortognatska kirurgija, funkcionalan ili estetski postupak

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Sažetak

Ortognatski kirurški zahvati mogu biti funkcionalni i estetski. Prikazani su pacijenti te ortodontske i kirurške indikacije za kirurško liječenje.

U prikazu su raspravljani primjeri preoperativnog planiranja, tijeka liječenja, rezultata i komplikacija za plastiku brade, razvoj i pomicanje donje čeljusti, razvoj gornje čeljusti i bimaksilarne zahvate.

Orthognathic Surgery - Functional or Aesthetic Surgery

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Summary

Orthognathic surgery can be a functional and aesthetic operation. Patients, orthodontists and our indications for surgery will be presented.

Preoperative planning, course of therapy, results and complications for genioplasty, mandibular development and setback, maxillary development and bimaxillary operations will be discussed.

C-erbB-2 kao biomarker premalignog potencijala OLR-a

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Sažetak

Ovim istraživanjem nastojao se procijeniti moguću premaligni potencijal lezija oralnoga lihen rubera (OLR-a) određivanjem intenziteta ekspresije tkivnog antigena c-erbB-2 u odnosu prema kliničkom obliku i kliničkom statusu lezija. Napravljena

je usporedba tkivne ekspresije antigena c-erbB-2 između erozivnog (LRE) i planog oblika (LRP) oralnog lihen, te usporedba s intenzitetom upale i hiperkeratozom lezija.

U istraživanje je bilo uključeno 30 bolesnika s kliničkom i patohistološkom dijagnozom OLR-a. Dobiveni rezultati uspoređeni su s kontrolnom skupinom koju je tvorilo 15 bolesnika s dijagnozom oralne leukoplakije (OL) koja je verificirana kao leukoplakija simpleks.

Tkivni antigen c-erbB-2 dokazan je APAAP i LSAB imunohistokemijskim metodama nakon predhodne obradbe biopsijskih uzoraka u mikrovalnoj peći. Reakcija je pokazala određeni mozaicizam i u intenzitetu i u topografiji pojavljivanja. Opažena je pozitivna reakcija na taj tkivni antigen prvenstveno u spinoznom sloju stanica oralnoga epitela, a negativna je bila u bazalnom sloju stanica. Reakcija je bila intenzivno pozitivna u tonofibrilima stanica spinoznoga sloja. Nije opažena razlika u intenzitetu reakcije na taj tkivni antigen između erozivnog i planog oblika oralnoga lihen. Intenzitet reakcije na tkivni antigen c-erbB-2 nije korelirao s intenzitetom upale, ali je zato pozitivno korelirao s intenzitetom hiperkeratoze lezija.

Može se reći da je ekspresija tkivnog antigena c-erbB-2 u lezijama OLR-a izmijenjena, što upućuje na njihovu izmijenjenu prirodu i na njihov određeni premaligni potencijal.

C-erbB-2 as a Biomarker for Premalignant Potential of Oral Lichen Ruber

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Summary

The object of this investigation was to estimate the possible premalignant potential of lesions of oral lichen ruber (OLR) by determining the intensity of expression of tissue antigen c-erbB-2 in relation to the clinical form and clinical status of the lesion. Comparison of the tissue expression of antigen c-erbB-2 was carried out between erosive (LRE) and

planus form (LRP) oral lichen, and comparison according to the intensity of inflammation and hyperkeratous lesions.

The investigation included 30 patients with clinical and histopathological diagnosis of OLR. The results obtained were compared with a control group comprising 15 patients with a diagnosis of oral leukoplakia (OL), verified as leukoplakia simplex.

Tissue antigen c-erbB-2 was demonstrated by APAAP and LSAB immunohistochemical methods, following prior analysis of biopsy samples in a microwave oven. The reaction showed specific mosaicism, in both intensity and topography occurrence. Positive reaction to this tissue antigen was observed, primarily in the spinous layer of cells of the oral epithelia, while negative reaction occurred in the basal layer of cells. The reaction was intensively positive in the tonofibrile cells of the spinous layer. No difference was observed in the intensity of the reaction to this tissue antigen between erosive and planus form of oral lichen. The intensity of the reaction to tissue antigen c-erbB-2 did not correlate with the intensity of the inflammation, although it positively correlated with the intensity of the hyperkeratose lesion.

It can be said that expression of tissue antigen c-erbB-2 in ORL lesions was changed, which indicates their changed nature and specific premalignant potential.

Salivarne i serumske vrijednosti interleukina 6 i bazičnoga čimbenika rasta fibroblasta u bolesnika s planocelularnim karcinomom

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Sažetak

U literaturi postoje podatci o ulozi interleukina 6 (IL-6) i bazičnoga čimbenika rasta fibroblasta (bFGF) u bolesnika s oralnim karcinomima, ali nema