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Ectopic Intra-Nasal Tooth: A Case Report

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Abstract

An ectopic tooth in a nasal cavity is a rare phenomenon. In most cases, no etiological explanation of teeth in that location has been suggested or found. We report the case of a 26-year-old man, who discovered, 5 years ago, an induration inside his right nasal pit, which caused an unilateral nasal obstruction, without rhinorrhea, with epistaxis, revealing an ectopic in intra-nasal tooth.

Keywords: Tooth; Intranasal; Ectopic

Introduction

Ectopic intra-nasal teeth locations are very rare phenomenon, and can occur in several other places in the body. The incidence of these intranasal ectopic teeth varies between 0.1 and 1% in the general population [1]. They can be found in the palate, the maxillary sinus or the floor of the nasal cavity. Even cases in the lower turbinate have been reported. It is important to identify these ectopic teeth, because of the morbidity they can cause.

Case report

We report the case of a 26-year-old man with no notion of facial trauma or any other significant pathological history, who witnessed, 5 years ago, the development of an induration inside his right nasal cavity, causing painful nasal unilateral obstruction, epistaxis episodes without rhinorrhea. The clinical examination found a hard mass in the floor of the right nasal fossa, covered by mucous membrane and purulent secretions, with a repression of the nasal septum which was deflected towards the controlateral side (Figure 1).



Figure 1: Endoscopic image showing venture at the lateral wall of the right nasal fossa

The facial CT scan (Figure 2) has showed a mass of calcium density with a lipid center adjacent to the floor of the right nasal fossa, in relation to an included tooth. Endoscopic surgery was performed under general anesthesia to remove the mass from its location.



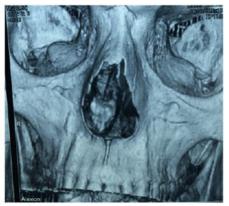


Figure 2: CT in coronal section and reconstruction showing a picture of calcium density in the level of the right nasal fossa

Histological study confirmed the dental nature of the mass.

Two months after surgery, right nasal cavity was normal, with no signs of recurrency (Figure 3).

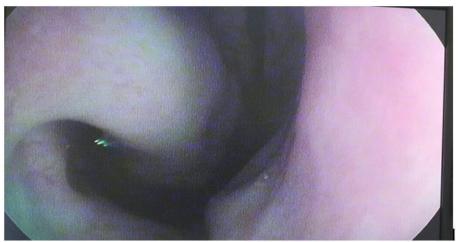


Figure 3: Endoscopic image showing a normal right nasal fossa after surgery

Discussion

An intranasal ectopic tooth remains a rare phenomenon. In the majority of cases reported in the literature, no etiological explanation was found [1]. However, a number of hypotheses were raised, such as the displacement of a dental bud following dental trauma, maxillary osteomyelitis, or the development of defect such as cleft palate [1].

In most cases, intranasal ectopic teeth are most commonly seen as a single unilateral tooth rather than several teeth or teeth in both nasal cavities [2,3]. The most frequent clinical signs are permanent unilateral nasal obstruction, facial pain and recurrent epistaxis [4,5]. Clinical examination reveals a whitish mass surrounded by granulation or a mass coated with reddish mucosa [2].

The imaging of an intranasal tooth finds an opaque mass of a density similar to the bone. The diagnosis is made based on radiological informations and proven by histology [6].

The treatment requires surgical removal, which usually relieves symptoms.

The surgery is a usually minor one [6]. The extraction of the nasal teeth can be carried out under endoscopic guidance, which offers clear visualization, good illumination and precise dissection to minimize the injuries of neighboring structures [7]. Histological study confirms the diagnosis.

Conclusion

Ectopic intranasal teeth are rare phenomenon, and can cause several symptoms. Early diagnosis and treatment are important to prevent morbidity from these nasal masses.

Author's Contribution

All the authors participated in the care of the patient, and in the realization of the article. All authors have read and approved the final version of the manuscript.

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