Dental Management of Non-Syndromic Supernumerary Teeth near the Angle of Mandible

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INTRODUCTION

Supernumerary teeth may be defined as any teeth or tooth substance in excess of the usual configuration of 20 deciduous and 32 permanent teeth. Supernumerary teeth may occur in single, multiple, unilateral, or bilateral and in one or both jaws. The occurrence of multiple supernumerary teeth is a rare phenomenon and is often found in association with syndromes such as cleidocranial dysplasia, Gardner’s syndrome, or cleft lip and palate. Only a few examples of non-syndromic multiple supernumerary teeth have been reported in the literature. The most common supernumerary teeth, listed in order of frequency, are the maxillary midline supernumeraries, maxillary fourth molars, maxillary paramolars, mandibular premolars, maxillary lateral incisors, mandibular fourth molars, and maxillary premolars. Supernumerary teeth occur in the upper jaw ten times more frequently than in the lower jaw. Multiple impacted teeth may be related to metabolic disorders. In some cases, however, impaction of multiple teeth is not accompanied by a complex of symptoms. Although multiple supernumerary teeth without associated syndromes are rare, their occurrence can create a variety of clinical problems such as crowding, delayed eruption, diastema, rotations, cystic lesions, and resorption of the adjacent teeth. Hence, suitable treatment and proper clinical and radiographic evaluation is essential. The aim of this case report is to document a rare and an unusual case of multiple impacted supernumerary mandibular third molars in an adult patient which is a unique presentation in the absence of any syndrome and to discuss our proposed clinical approach.

CASE REPORT

A 52 year old female patient diabetic, reported to the dental clinic with a chief complaint of pain in left lower back tooth region since 1 month. There was no relevant family history of any dental defect. The extra oral examination showed abnormalities in the angle of mandible, and the intraoral soft tissue examination revealed a normal gingival and well maintained oral hygiene. Carious tooth/teeth were detected on hard tissue examination, neither was any other abnormalities noted intra orally that might be contributory to the patient chief complaint of pain.

Radiographic Findings

Panoramic radiograph discovered the presence of an impacted left mandibular 0.33 molar and a small fourth molar distally positioned (Figure 1). The very last prognosis changed into impacted
Treatment
Patient don’t have any sinus or ache, so the remedy comply with up.

DISCUSSION
Patient with an ectopic tooth impaction can remain asymptomatic over the course of their lifetime. Distomolars or Distodens are supernumerary tooth located distal to third molar and are usually rudimentary. Generally these teeth are smaller in size than normal second and third molar and their general crown morphology is highly abnormal. Although the literature indicates that maxillary supernumerary molars are not uncommon in adults, supernumerary molars in mandibles are rare. Furthermore, supernumerary molars are extremely rare in young patients. Many hypotheses concerning the cause of supernumerary teeth have been suggested, but their occurrence has not yet been fully clarified. It has been suggested that supernumerary teeth result from atavism or reversion. Aberrations during embryological formation may cause supernumerary teeth formation and it is believed that supernumerary teeth arise from local, independently conditioned hyperactivity of dental lamina or remnants of dental lamina. It is also possible that supernumerary teeth may result from division of a developing tooth bud (dichotomy); there are a number of factors that might split a normal tooth germ and give rise to the development of multiple individual teeth. A hereditary component has also been suggested and current genetic studies have revealed the possible interventions of ectodine as an inhibitor protein against the third or supernumerary dentition. Supernumerary teeth occasionally occur within the same family. The incidence of supernumerary teeth varies between 0.45%-3%, depending on the literature source and is more common in females than in males (2:1) like reported in the present case. Supernumerary teeth can have normal morphology and are referred to as “supplementary teeth”. On the other hand, supernumerary teeth may be rudimentary in shape and smaller in size. Supernumerary molars are found more frequently in the maxilla approximately 90% cases of the cases reported in the literature than in the mandible. But our present case reported supernumerary teeth in mandible which is a rare case. Supernumerary teeth can pose problems for the eruption and alignment of normal dentition. Associated problems can include a range of conditions such as failure of eruption, displacement, crowding, adjacent tooth resorption and the formation of dentigerous cyst. Such eruption disturbances can be prevented by early diagnosis and appropriate treatment. To determine an appropriate treatment plan for supernumerary teeth, it is important to evaluate their exact position and the moment at which the teeth might cause various disturbances. [1-8].

CONCLUSION
Fourth molar or distodens incidence is extraordinarily uncommon and could now no longer be frequently symptomatic or detected on ordinary dental exam. The early prognosis and right remedy in each case of distodens is critical elements for the prevention and war of words of the capacity worry they might motive.

REFERENCES