

Ameloblastic Fibroma

Marieh Honarmand,¹ Narjes Akbari*¹

Received: 20 Mar 2010

Accepted: 29 May 2010

Available online: 13 Feb 2012

1. Department of Oral Disease, Faculty of Dentistry, Zahedan University of Medical Sciences, Zahedan, Iran

Introduction

Ameloblastic fibroma is a rare mixed odontogenic tumor [1, 2]. The average age of affliction is 15 years old [3]. Tumor growth is slow and painless and leads to an expansion of jaws and migration and displacement of teeth and it is often asymptomatic [2, 3]. Several cases of malignant transformation to Ameloblastic fibrosarcoma (AFS) have been reported [4]. The patient was a 5-year old boy complaining of toothache in left part and acute swelling. In the radiological examination (Fig. A-1), soap bubble multilocular radiolucent lesion was found in the area between D, E, and 6 teeth of the left side of mandible. Radiolucency limit was specified and a thin sclerotic margin was found around the lesion. The lesion had caused posterior displacement of the tooth bud 6. The tooth bud 5 was missing and no change was found in the lamina dura of any of the teeth of the involved area. Considering the child's age, the most probable clinical diagnoses were dentigerous cyst and ameloblastic fibroma. In histopathology, the second case was proved (Fig. 2). The mass was completely enucleated and in the next six month follow-up, no symptom of recurrence was found (Fig. B-1).

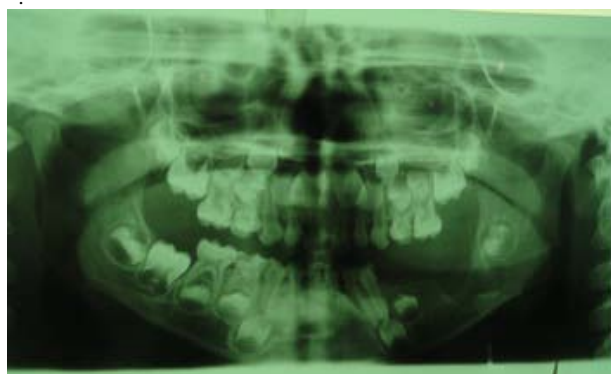


Figure 1-B. New bone formation at the site of the lesion (6 months later)

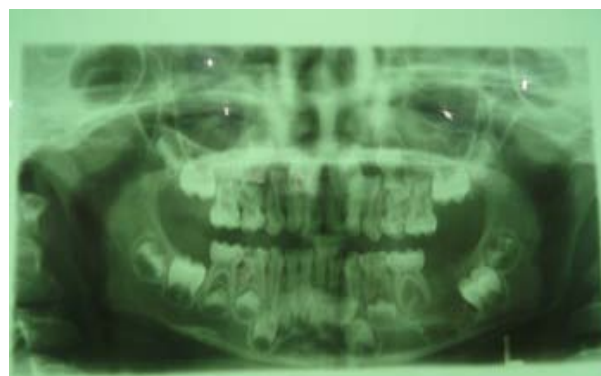


Figure 1-A. Multi-lucular soap bubble radiolucency

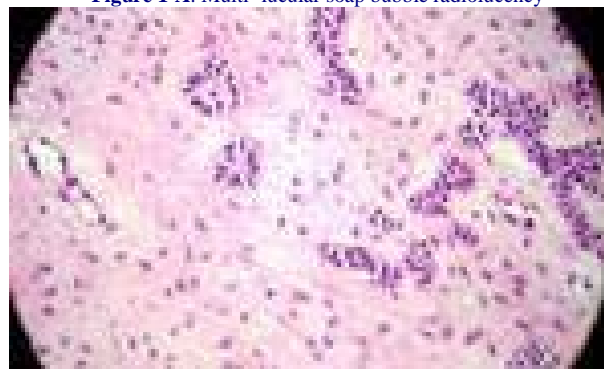


Figure 2. Islands same follicle epithelial mesenchymal stromal cells in a loose matrix

Authors' Contributions

All authors had equal role in design, work, statistical analysis and manuscript writing.

Conflict of Interest

The authors declare no conflict of interest.

Funding/Support

Tarbiat Modares University.

Corresponding author: narges_akbare4021@yahoo.com

© 2013 Zahedan University of Medical Sciences. All rights reserved.

References

- Philipsen HP, Reichart PA, Praetorius F. Mixed odontogenic tumours and odontomas. Considerations on interrelationship. Review of the literature and presentation of 134. New cases of odontomas. *Oral Oncol* 1997; 33(2): 86-99
- Kim SG, Jang HS. Ameloblastic fibroma: Report of a case. *J Oral Maxillofac Surg* 2002; 60(2): 216-8.
- Garcia-Pola Vallejo M, Gonsalez Garcia M, Villalain AlvarezL, et al. Ameloblastic fibroma: A case report in a 6 year old. *J Clin Pediatr Dent* 2001; 25(3): 245-8.
- Bregni RC, Taylor AM, Garcia AM. Ameloblastic fibrosarcoma of the mandible. Report of two cases and review of the literature. *J Oral Pathol Med* 2001; 30: 316-320.

Please cite this article as: Honarmand M, Akbari N. Ameloblastic fibroma. *Zahedan J Res Med Sci (ZJRMS)* 2013; 15(1): 63.