The pattern of benign jaw tumours in a university teaching hospital in kenya:

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Date: 2011

Abstract:

The importance of oral and maxillofacial tumours lies in the fact that they are rare, cause disfiguring of the face necessitating subsequent reconstructive surgery, (Nzegwu and Uguru 2008), The skull, jaws and facial bones are not only the site of a number of unusual lesions but, also pose unique histological problems often associated with intra-oral variation in oral structure varying from potentially malignant to pseudo malignant features, (Odwell 2001 and Barret 2001), Odontogenic tumours (OT) are exclusive to the jaws, as they are derived from epithelial and / mesenchymal elements that are part of the tooth forming apparatus, There is a variance in the frequency of the various types of OT geographically, (Gupta et al. 2011, Regezi JA 1993 and Barnes L 2005), They account for between 1 % to 30% of oral lesions, (Ulmansky M 1999, Arotiba JT 1997, Odukoya 00 1995), Despite various studies done in some countries across the continents including Africa there remain unanswered questions as to the frequency and incidence of some OT, (Elison Simon 2005 and Kamulegeya 2008), The bone related lesions (BRL) include the fibro-osseous lesions (FOLs), cherub ism and aneurysmal bone cysts (ABC) in accordance with the latest classification (Reichart), The WHO classifies the following as fibroosseous lesion among the NOT: fibrous dysplasia (FD), ossifying fibroma (OSF) and cementosseous dysplasiatf.Ofr). (Liu Y 2010), FOLs are a group of poorly defined lesions with more than 70% affecting the head and neck region (Barnes 2005),