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REVIEW ARTICLE

ECTOPIC NASAL TOOTH: A CASE REPORT

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ABSTRACT

Ectopic tooth is a rare finding which may be incidental finding or symptomatic. In this case report we present a 10-year-old boy who presented with epistaxis for 6 months after minor trauma. His Computed Tomography (CT) scan showed a right nasal ectopic tooth which was removed and complete resolution of the symptoms on follow up. CT is important before management for possible diagnosis confirmation and treatment plan.

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INTRODUCTION

Ectopic tooth is the eruption of tooth in unusual location (1). This can occur in the maxillofacial region, ovaries, testes, anterior mediastinum and presacral regions (2). It is presumed that this may result from abnormal development, trauma, infection or congenital abnormalities (3,4,). In addition, literature has revealed that ectopic tooth is rare with the occurrence ranging from 0.1% to 1% and they are most common in the maxillary sinuses while nasal cavity is extremely rare (4).

Case presentation: A 10-year-old male presenting with recurrent nasal bleeding for 6 months which was preceded by minor trauma after a fall. Patient has no history of recurrent sinusitis. No nasal congestion, headache or bad smell from the nose. Upon examination, the child looked healthy with stable vitals. The Ear Nose and Throat (ENT) examination revealed right nasal swelling. Paranasal CT scan was done which revealed tooth shaped hyperdense lesion in the right nasal cavity concluded to be Ectopic tooth. The tooth was removed in a dental department without any complications.

On a month follow up, the patient recovered completely. No more nasal bleeding. Figure 1 shows Bone window Axial CT scan images of the paranasal sinus at two different levels showing tooth-equivalent density with centrally located pulp cavity in the right nostril. Nasal septum appears intact.

DISCUSSION

Our patient was a male and the ectopic was in the right nasal cavity. A study of 13 patients with intranasal ectopic tooth found that 70% were males (in keeping with this finding) however the side that was more involved was the left side (in contrast to our finding) (3). The main cause of ectopic tooth is still unclear although different theories exist to explain including trauma, abnormal development/embryology and infection. In a case report by Dokania et al. 2021 a four-yearold male was found to have ectopic nasal tooth because of dental trauma. This was evidenced by loss of maxillary central incisor after the trauma which was later visualized as a white nasal mass by mother as well as endoscopic examination that revealed granulation tissue surrounding the tooth (4). In our case however, the trauma cannot be directly linked to the presence of ectopic nasal tooth because the respective teeth were on oral cavity examination, but it is a possibility.



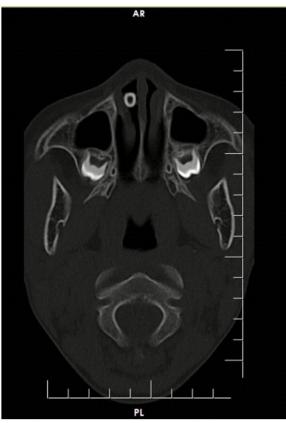


Figure 1. Axial CT scans

The presentation of ectopic tooth may be symptomatic or asymptomatic depending on the location, cause and duration of the condition. The presenting features may include nasal obstruction, pain, nose bleeding or headache.

Differential diagnoses for nasal ectopic tooth include rhinolith and Arora et al. further included foreign bodies, odontomas/

osteomas, teratomas and supernumerary tooth germs in ectopic locations (1). Diagnosis can be made using clinical, endoscopic and radiologic examination with or without histopathologic confirmation. Endoscopy can be used in the diagnosis as well as removal of the ectopic tooth or foreign body. Computed Tomography (CT) scan is helpful as it confirms the diagnosis and can give details of the adjacent structures in relation to the ectopic tooth (2,9). To prevent further complications, it is important for the ectopic tooth to be removed which may be achieved by endoscopy guidance. Some authors suggest asymptomatic ectopic tooth can be left untouched (7).

CONCLUSION

Nasal ectopic tooth is a rare entity with different presentations including epistaxis and nasal congestion. Diagnosis is done by the combination of clinical, endoscopic and radiologic examination. Multidisciplinary team involvement is important for the benefit of the patient. Removal or non-removal of the tooth may depend on many factors including the location, presenting features and complications that may occur.

Consent: The written consent to use the child's presentation and images for publication was obtained from child's father. Privacy of the child was ensured by not revealing the identification details.

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