

Webinar on

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Evaluation, treatment, complication and prognosis of Ameloblastoma

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Ameloblastoma is an odontogenic tumor notable for its aggressive behavior and tendency to recur. This review discusses the diagnosis, treatment options, complications, and prognosis associated with ameloblastoma. The review begins with a thorough examination of the patient's medical history, followed by advanced imaging techniques such as panoramic radiographs, cone-beam computed tomography (CBCT), and magnetic resonance imaging (MRI) to determine the tumor's extent. Histopathological examination, including incisional biopsies, is crucial for diagnosis and subtype determination. The discovery of BRAF V600E mutations in a subset of ameloblastomas has significant diagnostic and therapeutic implications. Treatment strategies vary based on tumor characteristics, ranging from conservative methods like enucleation and curettage to more radical approaches such as mandibulectomy or maxillectomy, often necessitating complex reconstructive

procedures. Post-surgical complications, including functional impairments and aesthetic concerns, highlight the need for multidisciplinary care. The review emphasizes the importance of long-term follow-up due to the high risk of recurrence, emphasizing regular clinical checkups and imaging. Complications from treatment can significantly impact quality of life, making comprehensive post-operative care essential. Recent advancements in molecular markers and diagnostic techniques have enhanced the understanding and management of ameloblastoma, paving the way for targeted therapies. This comprehensive review aims to provide a detailed understanding of ameloblastoma, guiding clinical practice and future research. By integrating clinical observations with cutting-edge research, it contributes to improved diagnostic accuracy, treatment efficacy, and patient outcomes in the management of this rare odontogenic tumor.

Biography

Gharam Awadh Al Anazi is a Dental Assistant at Prince Sultan Medical Military City in Riyadh.