

Alahmari Albatool, Dent Health Curr Res 2024, Volume: 10

Webinar on

DENTAL AND ORAL HEALTH

July 23, 2024 | Webinar

Management of riga-fede disease: A case report with six years follow up

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iga-Fede disease, initially identified by Antonio Riga in 1881 with additional histological tests by Francesco Fede in 1881, is an uncommon juvenile ailment characterized by persistent lingual ulcers caused by recurrent trauma. The ventral surface of the tongue is frequently affected. Presentation appears to be bimodal, correlating with natal (present at birth) or neonatal (erupting within the first 30 days of life) teeth and primary teeth eruption. Identification of the etiology of a condition is facilitated by categorizing it into two distinct groups. "Early" cases (before six months of age) are associated with natal or neonatal teeth, which frequently exhibit hypoplastic enamel and undeveloped roots, leading to early movement. "Late" cases (six months or older) occur with primary dentition, are habitual, and may be associated with a neurological or developmental issue.

Neonatal teeth or underlying neurodevelopmental problems, such as Down syndrome, Encephalopathy, microcephaly, and cerebral palsy, are regarded as causal or associative causes. Natal teeth are uncommon; the occurrence ranges from one in 2000 to one in 3000 live births, and they are often lower central incisors that appear in infants younger than two years. Other possible ulcer sites include the lip, palate, gingiva, vestibular mucosa, and floor of the mouth. Tongue ulcers account for 60% of all lesions. It is a benign ulcer of the mucosa. Yet, Riga-Fede disease's elevated edges frequently mimic a malignant process. It is essential to be aware of this benign condition in order to avoid unnecessary concern and biopsy. Both genders are affected equally. The differential diagnosis encompasses infectious and malignant diseases. When normal treatment fails to alleviate symptoms, a histological diagnosis must be performed. Due to the risk of aspiration or problems with breast-feeding, it is recommended that natal teeth be extracted.

This case study demonstrated that RFD developed in a 20-day-old infant without any associated syndrome; the conservative treatment was not effective with delay in the healing. The extraction of neonatal teeth was chosen as treatment of choice, resulting in improvement and normalization of feeding. Early detection of RFD is desired to avoid inadequate nutrition intake by the infant and growth retardation. Proper evaluation and planning of cases with natal and neonatal teeth is crucial to avoid space loss in anterior teeth

Biography

Alahmari Albatool is a General Dentist at Prince Sultan Medical Military City in Riyadh.