

Conclusion: In the present study, no statistically significant difference was found between the incidence of postoperative complications in patients with CD4+ lymphocyte counts below 250 cells/ μ L compared to patients with a higher CD4+ level. The only clinical variable that acts as a statistically significant predictor for postoperative complications is the clinical stage B of the disease, which includes specific morbid conditions. However, in both groups we found a delay in wound healing, physiological in the context of pathology, pain and post-extraction alveolitis and complications from post-operative over-reaction. However, further studies and investigations are needed to clarify the role of other serological markers such as CD4 /CD8, in the infectious and inflammatory process, with a larger sample of patients in order to increase the validity of the research.

Gingival verruciform xanthoma within desquamative gingivitis lichen planus related: a case report

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Aim: Verruciform xanthoma (VX) is an uncommon reactive lesion first described in the oral mucosa in 1971. The incidence rate reported is 0.025–0.095% within a 12 years period. Its aetiology is unknown, but it is believed to be a reactive lesion, maybe a response to trauma, chronic inflammation or an altered immunological response, which releases lipid material, with an epithelial damage and the characteristic foamy and/or granular histiocytic infiltrates. Oral VX usually appear as asymptomatic, slow-growing, well demarcated plaques or nodules with a papillary or verrucous surface, ranging in colour from pink, red, white, or yellow. The majority of cases have been reported on masticatory mucosa including gingiva and hard palate. Due to the variable presentation, VX are frequently misdiagnosed clinically; a microscopic examination is therefore needful. Oral lichen planus (OLP) is a common immune-mediated mucocutaneous disorder, with an estimated worldwide prevalence of 1–2%. The aetiology still remains unknown, although immune dysregulation seems to play a critical role in the development and progression of OLP. OLP is also considered as an oral potentially malignant disorder. Several VX cases have been reported in association with underlying immune-mediated, or other conditions, such as Pemphigus Vulgaris, Lupus Erythematosus, Dystrophic Epidermolysis Bullosa, Graft-Versus-Host Disease (GVHD). The

coexistence of VX with cutaneous Lichen Planus, or other conditions in genital area is well described in dermatology literature, but only 11 cases have been reported in the oral mucosa of patients with the aforementioned disease. We present a case of VX in a patient with undiagnosed OLP.

Methods: A 66 years old woman affected by depression and using Vortioxetine, came to the Oral Medicine Unit, C.I.R. Dental School of Turin, complaining about a lesion arisen on upper right gingiva, from undefined time.

The intraoral clinical examination revealed an asymptomatic pink-white, sessile lesion, with a granular surface, finely speckled and measuring 0.7 cm of diameter in the upper right gingiva, also involving the fornix and the alveolar mucosa. The lesion was soft in consistency on palpation. At oral examination white striae in a reticular pattern were also observed in the right and left buccal mucosa and gingiva, consistent with the clinical diagnosis of OLP. Patient denied skin or genital lesions. Due to the size of the neoformation, an excisional biopsy was performed under local anaesthesia. Also, an incisional biopsy was performed on one of the white reticula.

Results: Microscopic examination showed hyperplasia with projections of the surface epithelium in a verrucous pattern with hyperparakeratosis and acanthosis. Accumulation of foamy histiocyte cells with sparse inflammatory cells was noted in the chorion. Dysplasia was not evident. The diagnosis was of VX. The microscopic examination on the second sample confirmed the diagnosis of OLP.

DISCUSSION AND Conclusion: The clinical diagnosis of VX may be challenging, and the differential diagnosis should include benign lesions, such as squamous papilloma, condyloma acuminatum, and verruca vulgaris, but also potentially malignant disorders including leucoplakia and erythroplakia, and malignant tumours, such as verrucous carcinoma and squamous cell carcinoma. Due to the fact that VX may mimic malignancy, biopsy is required for definitive diagnosis, especially when this benign tumour occurs in conjunction with lesions or conditions that may exhibit the potential of malignant transformation, such as OLP.

Tumor-associated tissue eosinophilia in tongue squamous cell carcinoma

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Aim: Head and neck squamous cell carcinoma (HNSCC) is reported to be the sixth most common kind of cancer worldwide. More than 90% of HNSCCs involves the mucosal surfaces of the oral cavity. Whereas, there are advances in therapy and general knowledge about this kind of cancer, the prognosis did not see any improvements. In particular, some kind of tumors show an increase of chemotherapy resistance. Last evidence shows how microenvironment could have a role, not only in the chemotherapy resistance, but also in tumor onset and progression. In detail, the variation in number of eosinophils seems to be associated with different prognosis. Being the count of eosinophils a simple and affordable exam it could have a remarkable role. For this reason the aim of this study is to show the possible association between the eosinophils and patient's prognosis tongue squamous cell carcinoma.

Methods: Routine haematoxylin-eosin (H&E) stained sections obtained from formalin-fixed, paraffin-embedded blocks of the primary tumour specimens, were carried out from the most invasive part of the primary tumour. Tumor-Associated Tissue Eosinophilia (TATE) was evaluated by two different pathologists. Only cells with eosinophilic cytoplasmic granules were considered. Eosinophils located within extensive necrotic areas and blood vessels were excluded from the analysis. Eosinophils at the invasive front were counted under a high-power objective (x 400 magnification) for 10 randomly high-power fields (HPF) using a light microscope. Multivariate analysis was build in order to explore the prognostic value of the main clinic-pathological variables together with the TATE. Gender, staging 7th AJCC edition, age and grading were used in the model. Results were reported as Hazard Ratio (HR) and 95% Confidence Interval (C. I.). p values <0,05 were considered as statistically significant.

Results: Of 50 patients, 31 patients reported lower values of tumor-tissue associated eosinophilia. These patients reported a worse overall survival, with a risk of death almost 2 times higher than patients with higher levels of eosinophilia. This resulted to be an independent variable from staging, grading, age and gender in predicting patients' prognosis.

Conclusion: Eosinophilia seems to be a promising biomarker in tongue squamous cell carcinoma prognosis and these results can give support for further researches, investigating the role of eosinophilia in cancer microenvironment, under a biomolecular point of view.

What do we learn from the clinical and biological evaluation of the oral cavity in centenarians?

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Aim: The number of centenarians is rapidly increasing worldwide, and so are the studies on this segment of the population. A general consensus in the literature is that healthy longevity is an outcome of multiple factors, but the interrelationship between good oral health, oral pathology, and healthy aging remains not fully understood.

Methods: Within the "CaT - Centenari a Trieste" project, a population-based cohort study set in the province of Trieste, Italy, which includes 120 centenarians enrolled so far, we report here the results of the clinical and biological oral health evaluation. Subjective oral health-related variables were recorded by means of a self-evaluation questionnaire developed at the Oral Medicine and Pathology Unit of the University of Trieste Dental School, based on the WHO Oral health self-evaluation questionnaire with the aim of evaluating Oral Health Related Quality of Life (OHRQoL) both in the present and past. Moreover, a comprehensive oral examination of teeth, prosthesis, and mucosae was performed. In addition, also PROP taste perception, and salivary oxidative stress markers (TOS and FRAS) were measured. Finally, the oral data obtained were compared with the presence or absence of dementia in the enrolled subjects. Neuropsychological evaluation for cognitive impairment was performed using MMSE, Clinical Dementia Rating Scale (CDR), and, whenever possible, performing a series of seven tests taken from the Consortium to Establish a Registry on Alzheimer's Dementia (CERAD) battery.

Results: Centenarians included in our study were generally satisfied about their oral health. Among the causes of discomfort, the most prevalent were difficulties in chewing and biting, with few subjects describing a correlation between their mouth and psycho-social aspects. Most of the subjects were completely edentulous with a mean duration of this condition being 34.25 ± 20.1 years, and 75% of them wore removable prosthesis. Oral mucosae examination showed presence of oral pathologies in 28% of subjects. 16% suffered from oral candidiasis, 8% from traumatic ulcers, and 4% from osteonecrosis of the jaws. 15 subjects were diagnosed with dementia. We evaluated possible relations of clinical and biological variables to the likelihood of being demented and didn't find significant associations. We found a higher, even if not significantly, mean salivary flow (0.22 versus 0.16 ml/min) and antioxidant capacity