



www.animalclinic.com.au
17 Bellambi Lane, Russell Vale, 2518 NSW

Dr Liz Chmurycz BVSc CMAVA N5071
Veterinary Surgeon

Ph (02) 42 845988

Keeping pets Smiling since 1998.



Advanced Dentistry – Intra Oral Nodules

Some gruesome photos will be on this page, so if you are feeling squeamish, I would suggest you avoid this page.

Many of our pets have lumps and bumps in their mouths. Some of these are innocent enough (excess gum), and some are down right nasty (cancer). Many lumps can be removed without the need removal of large hunks of jaw.

Below are examples of two cases where masses were successfully removed at Russell Vale Animal Clinic, and have not recurred. Of course, some cases do need the more aggressive surgery, and those are referred to a Specialist.

Case One:

Toby is a 9 yo Silkie Terrier owned by a lovely older couple. During his Annual Examination in 2007, a small growth was noted on his lower incisor. He was booked in to have the nodule removed, and at the same time, the adjacent tooth also.



Usually, the required treatment for this type of lump was removal of a section of the jaw, but in 2006, a study was done which found that more conservative management (of removing the section of bone, and adjacent tooth) was sufficient in many cases (so long as histopathology was done to confirm complete excision). This was the option we recommended for Toby.

Below are photos of the original lump, after it was removed, how it closed over, and finally above, the tooth with the lump on it.



The histological diagnosis was oral plasmacytoma, which is an uncommon lump, with complete excision. Monthly monitoring for signs of recurrence for six months, then three monthly examinations for another six months was recommended (as it is for every lump removal surgery).

We now see Toby every year, as part of his Annual Examination, and have since removed other unrelated nodules from him, but this one in his mouth has not come back (as of 2011). Yeah!

Case Two:

Indy is now no longer with us, due to an unrelated problem, but in 2008, she was a 4 year old Fox Terrier. She has had this growth for 1.5 years, and the owners were unable to afford referral for aggressive surgery (removal of half of her jaw - hemimaxillectomy).

Even though it looked big, it was unlikely to be an aggressive bone tumour given that it has been growing relatively slowly over the 1.5 years, and previous debulking surgery with histopathology (done elsewhere) showed that it was a nodule arising from the periodontal ligament.

These nodules used to be called “epulis”, but the terminology has now changed a lot. In the old terminology, it was called a acanthomatous epulis, which would now be considered a peripheral ameloblastoma. At the end of the day, it was something that did not belong in Indy’s mouth, and so we had to plan on how to remove it.

Whilst a CT scan would've been ideal, to give us the information of how much was needed to be removed, that was not a financial option for Indy's family - so we planned for an aggressive surgery, but that still meant she had her top jaw.



In short, a section of gum was removed, with the bone, and the adjacent two teeth (there were teeth underneath that lump) - it closed over nicely (unfortunately, I cannot find my post operative films or photos!). Utilising a new technique of gum advancement, the gap was covered over, and unless you lifted the lip up, and knew that she had surgery, you would've just thought that she was just missing a few teeth!

Again, monthly check ups for six months, and three monthly checks for 12 months was necessary for Indy, but as of 2010 (when she crossed the Rainbow bridge), there was no recurrence (local or elsewhere) of this nodule.

Liz
December 2011