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Title: Surgical Management of Oral Epithelial Dysplasia: A Report on 94 Consecutive Cases.

Body: Background:

Oral epithelial dysplasia (OED) is a disorder of the oral mucosa characterized by cytological and architectural abnormalities, increasing the risk of oral squamous cell carcinoma (OSCC). This study analysed demographic and pathological data from OED patients who underwent excision of biopsy-proven dysplasia, focusing on concordance between biopsy and definitive resection diagnosis.

Methods:

This is a retrospective review of patients who underwent surgical management of biopsy proven OED at the National Maxillofacial Unit, St. James's Hospital, over a 3-year period. Demographics, clinical and pathological data, surgical complications were collected, with dysplasia graded using the WHO three-tier system.

Results:

A total of 94 lesions (39 homogenous [41%], 55 non-homogenous leukoplakias [59%]) in 80 patients were analysed. Biopsy and final histopathology had a 67% concordance rate. Of discordant cases, 42% overestimated and 58% underestimated dysplasia grade. Eleven cases progressed to invasive carcinoma. There was dysplasia at the margins in 59% of cases. There were no returns to theatre for management of surgical complications but three patients required re-admission.

Conclusion:

Excision of OED lesions is a safe procedure. However, incisional biopsy may not reliably predict final pathology in OED excisions due to the risk of underestimation. Clinical correlation along with biopsy is prudent.

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