

Florid Osseous Dysplasia

Florid osseous dysplasia is a condition that occurs in the bones of the jaws, including multiple quadrants of the mouth. Lesions are symmetrically and often found in equal numbers and size on both sides of the jaws. People with florid osseous dysplasia rarely have symptoms, and usually; the person does not know they have such condition until they go to the dentist, and they find out by seeing the radiographs during a routine dental examination. Occasionally the lesions expand or get infected and may cause discomfort or pain. The etiology of florid osseous dysplasia is unknown, it does not typically run in families, and there is no reasonable explanation for its gender and racial predilections. The clinical presentation of florid osseous dysplasia relies on the radiographs findings of the lesion as well as clinical signs and symptoms.

Radiographically the lesions change as they mature from radiolucent to radiopaque and resemble "cloud-like" masses that vary in size and shape. The number and the size of lesions can be different from person to person. The histology of florid osseous dysplasia is empty bone cavities, scant fibrous tissue which evolves into sclerotic dense bone with little vascularity. Florid osseous dysplasia mainly occurs in middle-aged women (30-50 years old) of African American and Asian descent. While the exact prevalence of this condition is unknown, the literature reports that about 5.5% of black women may have florid osseous dysplasia.

In most people, florid osseous dysplasia does not usually require any treatment. However, people with this condition should be followed by dental radiographs every 2 to 3 years. In addition, because infections are challenging to treat in people with florid

osseous dysplasia, it is recommended to the patient to maintain good oral health to prevent extraction due to poor healing bone. Also, recalls to the dentist should be frequent to get any necessary restorative treatment. The long-term outlook for people with this condition is usually good if they are compliant with all the recommendations. The diagnosis of florid osseous dysplasia can sometimes be confused with other conditions of the jaws. Since florid osseous dysplasia relies a lot on the radiography findings of the lesions as well as the clinical signs and symptoms, it can look like other, more serious conditions. And that is why it is crucial to make sure that florid osseous dysplasia is the correct diagnosis. Other conditions that can look like florid osseous dysplasia are; Gardner's syndrome, Paget's disease, Chronic diffuse sclerosing osteomyelitis, Fibrous dysplasia, Osteosarcoma, Periapical cemental dysplasia or infections.

As dental hygienists, we play an essential role in the treatment and maintenance of florid osseous dysplasia. Since most people do not have any symptoms, it is our job to identify in the radiographs that the patient presents with some multiple radiolucent/radiopaque lesions in all quadrants of the mouth. It is our job to inform the dentist as well as to give the patient recommendations on how important it is to maintain excellent oral hygiene, as well as constants visit to the dentist and routine dental radiographs. In addition, give the patient more information about the condition and let them know that it is nothing to worry about if they continue to follow the recommendations given.



Image #1: Radiographs of a 43 year old black women, asymptomatic and unawared of the radiolucent/radiopaque lesions on multiple quadrants of her mouth. This image was taken at New York City College of Technology.

References

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