**Florid Cemento-osseous Dysplasia**  
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**Overview**

There are three types of osseous dysplasia which are periapical cemental dysplasia, focal cemento-osseous dysplasia and florid cemento-osseous dysplasia. Florid Cemento-osseous Dysplasia is a benign bone, non-neoplastic condition that affects multiple quadrants of the jaws. It was first described by Melrose et al. These areas are affected when the normal bone is replaced by fibrous connective tissue and abnormal bone or cementum. Lesions are often located on the tooth bearing areas or edentulous areas and are asymptomatic, bilateral and symmetrical.

**Etiology**

The cause of this condition is unknown but may be genetic or hereditary.

**Clinical Presentation**

Clinically, a patient may present with edentulous, bony expansions, swelling and inflamed areas.

**Demographic**

Florid osseous-dysplasia usually affects black middle age females, usually women between 40-50 years of age.

**Biopsy / Histology / Radiographs**

Florid cement- osseous dysplasia radiographs presents with multiple radiopaque cloud-like masses surrounded by a thin radiolucent border located on 2 or more quadrants. They may be different in size and shape and become from radiolucent to more radiopaque as they mature. However, clinically all teeth are vital. This condition is diagnosed by clinical findings, age, race, gender and radiographs. Biopsy is not recommended because post-operative infection or bone fractures may occur. This means that if a biopsy is performed, an infection can occur within 30 days of surgery.

According to the article " Clinical, radiographic and histological findings of Florid Cemento-osseous Dysplasia" by the author Jeong-Hee Kim, histologically this condition presents with thick, confluent curvilinear trabeculae with little fibrotic stroma and dense sclerotic masses.

**Differential Diagnosis**

Other diseases or pathology that can be mistaken with Florid Osseous Dysplasia are Paget's disease, Gardener's syndrome, Chronic sclerosing osteomyelitis and Cemento ossifying fibroma. Paget's disease radiographs present with a cotton wool appearance affecting the whole mandible with loss of lamina dura. Also, it can involve different types of bones as spine, femur and pelvic.

**Treatment**

No treatment required for asymptomatic cases. However, follow up appointments are advised to evaluate the progression of this condition clinically and radiographically.

**Prognosis**

Follow up appointments are required to observe any progression and evaluate the stage of this condition.

**Professional Relevance**

As a Dental Hygienist we need to inform the patient about her/his condition and explain that there is non- malignance. This topic is relevant in the way that good oral hygiene is essential for the prevention of infections. We need to emphasize proper home care for patients who use partial or full dentures on edentulous areas.

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