

Bilateral maxillary and mandibular buccal exostosis: a self reported case and a proposal to include buccal exostosis under miscellaneous disorders of revised working classification of the psychosomatic disorders pertaining to dental practice

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LETTER TO EDITORS

Buccal exostoses are broad-based, benign surface growths occurring on the facial surface of the maxilla and mandible, usually seen in the premolar and molar region [1]. This letter calls attention to a case of bilateral maxillary and mandibular buccal exostosis occurring in the life of a dental surgeon.

The author is a 40-year-old male dental surgeon with

bilateral maxillary and mandibular buccal exostoses of a painless nature and uniform distribution (Fig. 1). The growths were bony-hard on palpation and the overlying mucosa was normal. The bony growths appeared in early adolescence and slowly increased in size with time. It is interesting to see that the buccal exostoses are seen distributed throughout the maxilla and mandible without any relevant medical history. Since the growths are a benign condition, the author does not undergo any treatment.



Fig. 1. Buccal exostosis: (A) Maxillary anterior region; (B) Maxillary posterior region; (C) Mandibular anterior and posterior region.

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The author had a habit of clenching his teeth, precipitated by emotional and psychosomatic components. The etiopathogenesis of this case may be related to excessive occlusal force generated due to frequent clenching of the teeth, resulting in bony hard growths on the facial and buccal surfaces of the maxilla and mandible in relation to the individual tooth. Even though the etiology of buccal exostosis is unknown, it has been suggested that buccal exostosis can be caused by abnormally increased masticatory forces to the teeth [1].

The author has already proposed a psychosomatic disorder classification pertaining to dentistry [2]. Therefore, the possibility of psychosomatic etiology is evident in this case, and a proposal to include bilateral buccal exostosis under miscellaneous disorders of the revised working clas-

sification of the psychosomatic disorders pertaining to dental practice is suggested.

CONFLICT OF INTEREST

The author declares that there is no conflict of interest and no source of funding.

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