

# Bilateral supernumerary primary teeth in the maxillary anterior region

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## DESCRIPTION

Supernumerary teeth are additional teeth present in dentition and are more common in permanent dentition, however, they are a rare finding in primary dentition<sup>1</sup> and can be due to various genetic or environmental factors. The majority of supernumerary teeth seen in primary dentition are of a supplemental type and usually unilateral. Presence of supernumerary teeth has been noted in primary dentition but bilateral occurrence is rare.<sup>2</sup>

A 4-year-old girl with the symptoms of decayed teeth was brought to the dental clinic. Medical and family history was not significant. The patient had normal development and build for her age and sex. On clinical examination, an extra tooth was noted on either side of the maxillary quadrants, which mimicked, in shape and size, the lateral incisors more than they did the central incisors. These supplemental teeth were noted bilaterally mesial to the primary canines. Dental caries was noted in relation to 51, 52, 61 and 62 (figures 1–3). Intraoral periapical radiograph showed dental caries involving the pulp of 51 and 52 (figure 4). An orthopantomogram was taken to rule out other additional supernumerary teeth in the arches (figure 5). Bilateral supernumerary teeth mesial to primary canine was



**Figure 3** Occlusal view showing bilateral supernumerary teeth mesial to primary canines.

diagnosed based on the morphology of the primary lateral incisor crown, which was smaller in all dimensions compared to the supplemental; also, the roots of the supernumerary teeth appeared to be longer than those of the lateral incisors. Syndromes associated with supernumerary teeth



**Figure 1** Maxillary arch showing supernumerary teeth bilaterally distal to central incisor teeth on either side.



**Figure 2** Mandibular arch photograph.



**Figure 4** Intraoral periapical radiograph showing pulp involvement of 51 and 52.



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**Figure 5** Orthopantomogram showing bilateral supernumerary teeth on left and right sides.



**Figure 6** Orthopantomogram after pulpectomy of 51 and 52.

were ruled out by taking careful medical and family history and also by physical examination.

Oral prophylaxis followed by pulpectomy of 51 and 52, and restoration of 61 and 62, has been planned as treatment protocol. The bilateral supernumerary teeth are being kept under observation.

The rationale for maintaining the supernumerary teeth was based on the fact that no orthodontic treatment was possible

and complete eruption of the teeth had already occurred. Pulpectomy of 51 and 52 was performed (figure 6) in order to prevent space loss and to avoid the need for future orthodontic treatment. Supernumerary teeth should be periodically observed; they can be maintained in the oral cavity provided they do not cause problems in function or aesthetics.<sup>2</sup> When supernumerary primary teeth are identified, parents should be advised of the likely concerns to the permanent dentition. Also, important to remember is that these teeth resemble permanent dentition in 50% of cases.<sup>3</sup>

### Learning points

- ▶ Supernumerary teeth can lead to diastema, malocclusion, rotation, crowding, failure of eruption of adjacent teeth and delay in eruption of successor teeth.
- ▶ The general dentist would usually be the first to notice supernumerary teeth; so early and regular check-ups for prompt diagnosis can be helpful in preventing issues with pathology and aesthetics.
- ▶ Prevalence rates of supernumerary teeth in deciduous dentition is 0.4–0.8%, and for permanent dentition this ranges from 0.1–6.9%.

**Competing interests** None declared.

**Patient consent** Obtained.

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