DESCRIPTION
Dentigerous cysts surrounding impacted teeth often displace these teeth into ectopic positions. In maxilla, these teeth are often displaced into the sinus sometimes even to the level of floor of orbit. By illustrating this case we would like to emphasise the importance of a thorough imaging for any unaccounted missing tooth associated with vague symptoms like sinusitis or visual disturbances. A 19-year-old male patient reported with a vague pain on the right side of face which was throbbing in nature and radiating to the eye on the same side since 15 months. The patient gave no positive medical or family history. He reported transient diplopia in upward gaze occasionally. On examination, tenderness was revealed over the right malar region. Intraorally, there was missing maxillary right third molar. The second molar had been extracted for the same complaint a year back. Crepititions were palpated over the canine fossa region giving an impression of cystic lesion. Aspiration yielded straw coloured fluid. Surprisingly no symptoms of sinusitis were present. The patient’s orthopantomogram revealed a high posterior impacted third molar in the maxilla. To ascertain the position further, a CT scan was undertaken to ascertain the location, extent and access of the pathology (figures 1 and 2). The patient was operated for excisional biopsy of the cyst along with extraction of the involved molar via the Caldwell Luc approach under general anesthesia. Postoperative recovery was uneventful. Histopathology of the excised specimen confirmed dentigerous cyst while ruling out kerocystic, ameloblastic and malignant changes.

Figure 1  Coronal section CT scan showing posterosuperior position of the ectopic tooth with the dentigerous cyst encompassing the entire maxillary sinus on the right side.
Figure 2 3-D reconstruction of the CT scan shows involvement of the orbital floor.

Competing interests  None.
Patient consent  Obtained.

REFERENCES