Dental manifestations of congenital rubella syndrome

Ruchi Ahuja,¹ Anand L Shigli,² Gagan Thakur,³ Upendra Jain⁴

¹Department of Pedodontics and Preventive Dentistry, Peoples' College of Dental Sciences and Research Centre, Bhopal, Madhya Pradesh, India

²Department of Pedodontics and Preventive Dentistry, Bharati Vidyapeeth Dental College, Sangli, Maharashtra, India

³Department of Oral and Maxillofacial Surgery, Peoples' College of Dental Sciences and Research Centre, Bhopal, Madhya Pradesh, India

⁴Department of Orthodontics, Peoples' College of Dental Sciences, Bhopal, Madhya Pradesh, India

Correspondence to

Dr Upendra Jain, bracesupujain@gmail.com

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DESCRIPTION

Congenital rubella syndrome (CRS) has a low incidence and has been expected to reduce to 1/100 000 live-births. The infection can be acquired by contact with the togavirus family of microorganisms during pregnancy. Fetal development is completely paralysed once the microorganism is transmitted to the fetus.¹

Patients with CRS are usually categorised as special patients with exaggerated dental problems usually due to lacking manual dexterity and failure on the part of caretakers to provide timely oral disease prevention as they consider it secondary owing to the grave systemic problems the patient suffers from.² Treatment cannot be performed in a routine setup but requires physical restraints or sedation to cope with the patient's physical and intellectual limitations.³

In the present case, a 4-year-old girl had CRS with severe hearing disorders, congenital cardiopathy (ventricular septal defect, VSD) for which she had undergone surgical intervention 1-year prior. She had a minimal attention span and poor ability to respond to instructions given. Her mother revealed that as the child was unable to chew, her diet usually comprised of soft foods. Intraoral examination revealed not all teeth were cariously involved, however, the lower anterior teeth were diagnosed congenitally missing owing to a knife edged alveolar ridge (figure 1). Also, the maxillary arch was unusually narrow and the palate was deep (figure 2). Symptomatic relief of pain was provided by excavation and temporisation in decayed teeth.

Figure 2 Constricted maxillary arch and high palate.

Comprehensive treatment could not be planned under general anaesthesia due to the unwillingness of the parents for the procedure.

Learning points

- ▶ Congenital rubella syndrome (CRS) can be acquired by contact with the togavirus family of microorganisms during pregnancy.
- ▶ Patients with CRS are usually categorised as special patients with exaggerated dental problems usually due to lacking manual dexterity.
- ▶ Treatment cannot be performed in a routine setup but requires physical restraints or sedation to cope with the patient's physical and intellectual limitations.

Competing interests None.

Patient consent Obtained.

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Figure 1 Congenitally missing lower incisors.

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