

Lipoma of the identate alveolar crete: a rare localization

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Case Report

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ABSTRACT

Lipomas are benign mesenchymal tumors of adipose tissue that can develop in all tissues of the human body. Localization in the oral cavity, whether on the tongue, lips or cheek, is rare; In this article, we report the case of a 64-year-old hypertensive patient undergoing treatment and a chronic smoker weaned 10 years ago, who consulted us for a mass pedicled on the gum of the edentulous alveolar ridge of mandibular sector 3. The CT scan was in favour of a lipoma, and total excision confirmed the diagnosis. Intraoral localization of lipomas is rare, and localization on the attached gingiva has never been reported in the literature. Treatment remains surgical, with anatomopathological examination the only way to confirm the diagnosis and rule out a malignant lesion.

lipoma is a frequent benign tumor whose etiopathogenesis remains poorly elucidated. Localization in the oral cavity is rare, particularly on the attached gingiva, and treatment is usually surgical

Key Words: mucosa, soft tissue, tumor .

Received: 16 September 2024, **Accepted:** 12 March 2025.

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ISSN: 2090-097X, April 2025, Vol. 16, No. 2

INTRODUCTION

Lipomas are the most common benign tumors of the soft tissues, resulting from normal adipocyte proliferation and characterized by a slow, mostly asymptomatic evolution. Localization in the oral cavity is rare, representing 1% of benign tumors of the oral cavity, there are several histological variations of lipomas, apart from simple mature lipomas formed essentially by adipocytes, there are fibro-lipomas, angio-lipomas and intramuscular lipomas, which can only be differentiated by anatomopathological examination. We report the case of a lipoma of the edentulous alveolar ridge, a rare localization in the oral cavity.

CASE REPORT:

64-year-old patient with history of hypertension under treatment and chronic smoking cessation 10 years ago, never operated on, presenting with oral swelling for 5 years, gradually increasing in size and becoming bothersome in terms of mastication and speech. Clinical examination on admission revealed a hemodynamically and respiratorily stable conscious patient in good general condition. Examination of the oral cavity revealed a normal mouth opening; a poor oral condition, with multiple missing teeth, and the presence of a pedunculated mass on the gingiva of the alveolar ridge of the edentulous Sector 3, measuring approximately 4cm/2cm (Fig. 1). This mass was covered by normal-looking mucosa, and the rest of the examination was unremarkable. In view

of this clinical picture, a CT scan of the facial mass was requested to characterize the lesion, which came back in favour of an encapsulated mass of fatty density (figure 2). The patient was operated on under general anaesthesia with a monobloc excision of the swelling (figure 3). The specimen was sent for anatomopathological examination, which came back in favour of a mature lipoma.



Figure 1: appearance of gingival swelling

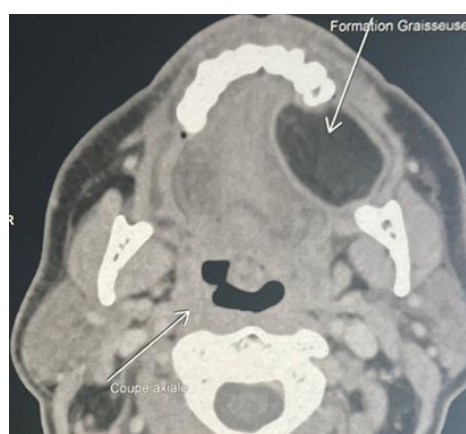


Figure 2: fatty formation on CT scan

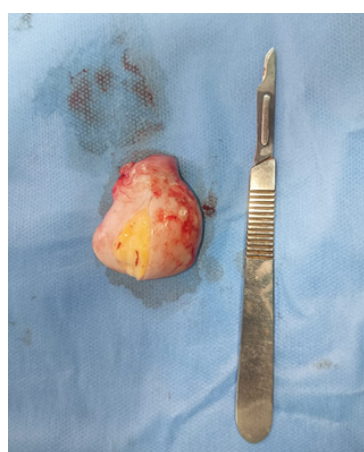


Figure 3: surgical specimen

DISCUSSION

Lipomas are the most common benign soft-tissue tumors, most often solitary but sometimes multiple in the context of lipomatosis, and sometimes of familial origin^[1]. They can occur in all fat-containing tissues, most often in adulthood and rarely in children, with no gender predominance^[2]. Endo-buccal localization is rare, accounting for only 4%^[3], and clinical symptoms are usually a painless, mobile, yellowish swelling visible under the mucosa, with no signs of infiltration or compression, in patients aged between 40 and 60^[4]. Multiple cases of localization in the tongue, lips and endojugal region have been reported^{[5][6]}; we report a particular case of lipoma of the attached mucosa of the edentulous alveolar ridge.

Superficial lipomas are easy to diagnose by palpation of a slowly evolving, painless, mobile mass under the mucosa. Deeper lipomas are more difficult to palpate, with reduced mobility. Ultrasound remains the first-line examination for localizations accessible to the superficial probe, while CT is often requested due to its accessibility, and MRI, the reference examination for soft-tissue tumours, is rarely requested except when there is a doubt of malignancy. In our case,

a CT scan was performed, revealing a well-limited mass of fatty density^[7]. Histological examination of a diagnostic biopsy or excisional specimen is the only examination that can confirm the diagnosis^[5]. Treatment of oral cavity lipoma is ideally surgical excision, which is what we opted for in our patient's case. Some teams use steroid injections or liposuction after infiltration with an adrenaline solution^[6], the type of anaesthesia depends on the location of the mass, its size and the patient's condition.

CONCLUSION:

lipoma is a frequent benign tumor whose etiopathogenesis remains poorly elucidated. Localization in the oral cavity is rare, particularly on the attached gingiva, and treatment is usually surgical.

CONFLICT OF INTEREST

the authors declare that there are no conflict of interest.

REFERENCES:

- [1] L. Delgado, "Maladies du tissu adipeux : lipomes, lipomatoses, lipodystrophies," 2011.
- [2] P. Inampudi et al., "Soft-tissue lipomas: accuracy of sonography in diagnosis with pathologic correlation.," *Radiology*, vol. 233, no. 3, pp. 763–767, 2004, doi: 10.1148/RADIOL.2333031410.
- [3] M. A. Furlong, J. C. Fanburg-Smith, and E. L. B. Childers, "Lipoma of the oral and maxillofacial region: Site and subclassification of 125 cases," *Oral Surgery, Oral Med. Oral Pathol. Oral Radiol. Endodontology*, vol. 98, no. 4, pp. 441–450, Oct. 2004, doi: 10.1016/J.TRIPLEO.2004.02.071.
- [4] P. Bonavolontà et al., "Large intraoral Lipoma: A case report of rare neoformation of the lower lip," *Oral Maxillofac. Surg. Cases*, vol. 9, no. 1, Mar. 2023, doi: 10.1016/j.omsc.2022.100290.
- [5] M. Mehendiratta, K. Jain, M. Kumra, and B. S. Manjunatha, "Lipoma of mandibular buccal vestibule: a case with histopathological literature review," *Case Reports*, vol. 2016, p. bcr2016215586, Aug. 2016, doi: 10.1136/BCR-2016-215586.
- [6] L. K. S. Kumar, N. M. Kurien, V. B. Raghavan, P. V. Menon, and S. A. Khalam, "Intraoral Lipoma: A Case Report," *Case Rep. Med.*, vol. 2014, no. 1, p. 480130, Jan. 2014, doi: 10.1155/2014/480130.
- [7] D. Sarfi, M. Konaté, S. Adnane, M. Elbouhairi, and I. Ben Yahya, "Intra oral lipoma: Report of 3 histologically different cases," *Adv. Oral Maxillofac. Surg.*, vol. 4, p. 100182, Oct. 2021, doi: 10.1016/j.adoms.2021.100182.