Short Communication

RARE CASE OF MULTIPLE SUPPLEMENTAL MOLARS IN A NON-SYNDROMIC PATIENT

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A 15 year old male patient reported to our outpatient department with complaint of presence of many teeth in his maxillary right posterior region. Familial, medical and dental history did not contribute for the presence of supplemental teeth. Extra-oral examination did not reveal any facial asymmetry or abnormality.

On intra-oral examination, full complement of permanent dentition was noticed with the exception of the third molars. Four supplemental molars were present besides the permanent molars in the first quadrant. Among these, three molars are placed palatal to second pre-molar, first molar and second molar. The fourth molar was placed palatal to the mesial most para-molar. [Figs 1 and 2] The right postero-lateral aspect of the hard palate was occupied by these para-molars.

Routine clinical examination was performed to rule out the association of a disorder / systemic abnormality, due to the presence of multiple supplemental teeth. The patient did not exhibit any skeletal deformity and neither his chest radiographs revealed any abnormality.

With the obtained dental findings and the absence of associated syndrome, the diagnosis was confirmed as a case of non-syndromic multiple supplemental teeth.

DISCUSSION

The supplemental tooth refers to a duplication of teeth in the normal series and is found at the end of a tooth series. The etiology of development of supplemental teeth is still not crystal clear. Dichotomy of the tooth bud may be one of the factors involved. The supplemental teeth can prevail in any part of the dental arch. The supplemental teeth occurs both in the deciduous and permanent dentition, but more frequently appreciated in the permanent dentition with an occurrence rate of 0.1-3.4%. The permanent maxillary lateral incisor are the most common supplemental tooth followed by premolars and molars. Literature shows a presence of less incidence of non-syndromal multiple supplemental teeth. More prevalence of such non-
Syndromic multiple supplemental teeth have been noticed in male gender. Various reports dictate that supplemental teeth are usually associated with Gardner syndrome, Fabry-Anderson syndrome, Ehler-Danlos syndrome and Cleidocranial dysplasia. On the other hand, the absence of such syndromes are usually rare. Less than 1% of cases are reported to have incidence of multiple supplemental teeth without any associated syndrome or disorder. In such non-syndromic cases, the supplemental teeth incidence is more in the maxillary region similar to our case with the presence of four supplemental molar teeth. The documented case could not be correlated with any syndrome, thus diagnosed as “Multiple Supplemental Molars”. Such a case of multiple supplemental teeth, not associated with any complex syndrome is a rare phenomenon.

REFERENCES