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Thesis Title	Comparative study between chronic sclerosing osteomyelitis (reactive hyperplasia of bone) and cemento-ossifying fibroma of the jaws, using light and electron microscopy		
Year	1982		
Abstract	<p>Ten cases of reactive hyperplasia of bone and 10 cases of cemento-ossifying fibroma of the mandible and maxilla were selected from the files of the division of oral pathology, department of pathology, and from the oral and maxillofacial surgery clinic of the university of Alabama schools of dentistry and medicine. Particular attention was paid to their clinical, radiographical, histopathological and ultrastructural features.</p> <p>Two groups of lesions occurred more frequently in black patients with a predilection for males. However, the cemento-ossifying fibroma showed a decided differences in both age distribution and mean age when compared to reactive hyperplasia of bone. The majority of lesions in the two groups were focal and were located in the mandible. Cemento-ossifying fibroma is a well-delineated expansile lesion in comprison to reactive hyperplasia of bone. Most of the cases of reactive hyperplasia of bone examined showed marked degree of ossification and consequent reduction in the amount of marrow present and in the number and activity of osteoblasts adjacent to the trabeculae. Woven bone was rarely seen in lesions showing only mild degrees of calcifications but was more prominent as calcification increase. Lamellar bone could be found in cemento-ossifying fibroma and was rather less common than in reactive hyperplasia of bone. However the most characteristic portion of the calcified tissue of cemento-ossifying fibroma was the round to oval calcified masses.</p> <p>In summary, it is the contention of this investigator that the lesions of reactive hyperplasia of bone and cemento-ossifying fibroma should be diagnosed on combined clinical, radiographic, and histologic grounds, since treatment for those two conditions is varied. Twenty patients were followed clinically and radiographically for periods ranging from two to 15 years. There was no evidence of re-development of reactive hyperplasia of bone or of cemento-ossifying fibroma following surgical removal of the lesions.</p>		