

**RESIDUAL CYST: A CASE REPORT**Dr. Logesh R.<sup>1\*</sup>, Akshaya Priya P.<sup>2</sup>, Dr. Narmatha N.<sup>3</sup>, Dr. Angelintena S.<sup>4</sup>, Dr. Lavanya S.<sup>5</sup>, Dr. Keerthiga L.<sup>6</sup><sup>1</sup>BDS, Lecturer, Tagore Dental College and Hospital, 600127.<sup>2</sup>CRRI, Tagore Dental College and Hospital, Chennai, 600127.<sup>3,4</sup>MDS, Senior Lecturer, Tagore Dental College and Hospital, Chennai, 600127.<sup>5,6</sup>BDS, Lecturer, Tagore Dental College and Hospital.**\*Corresponding Author: Dr. Logesh R.**

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**ABSTRACT**

The term residual cyst is used for a cyst that has persisted after its associated tooth has been extracted or lost. Residual cysts are commonly observed in males and frequently found in the anterior region of the maxillary jaw. Residual cysts are among most common cysts of the jaws and are generally asymptomatic. We are reporting a case of residual cyst in the mandible of a 38-years-old female patient with emphasis on the pathogenesis, clinical, radiological features and treatment aspects.

**KEYWORDS:** Asymptomatic, Associated teeth, residual cyst.**INTRODUCTION**

Residual cyst is another type of inflammatory odontogenic cyst that occurs in the edentulous alveolar ridge. It may occur due to extraction of the tooth, leaving the periapical pathology untreated or incomplete removal of periapical granuloma or periapical cyst. These cysts can be found at any tooth bearing area of the jaws, with 60% predilection to maxilla and 40% in mandible.<sup>[1]</sup>

**CASE REPORT**

A 38 years old female patient reported with complaint of pain in lower left back tooth region for past 1week.

Patient underwent extraction in lower left back tooth region past 1 year. His past medical history and dental history was not significant.

On intra-oral examination rendered missing of 36,46 and 47. On soft tissue examination no abnormality was noted.

Radiographic examination demonstrated unilocular well defined spherical radiolucency surrounded by well-defined sclerotic border measuring 2cm\*2cm in the region of left mandibular molar region (Figure1)

**Figure1: Panoramic radiograph showing well defined radiolucency.**

On the basis of chief complaint and investigation we came to the diagnosis of residual cyst

Cyst: Diagnostic Role of CT Scan. Case Reports in Dentistry, 2012; 2012: 760571.

## DISCUSSION

Residual cyst is a cyst that remains after incomplete removal of original cyst. residual cysts is the fifth most frequent type of Oral cyst<sup>[2]</sup> The residual cysts are intraosseous lesions. It grows slowly without symptoms unless they become secondary infected.<sup>[3]</sup> It occurs most common in mandible. Residual cysts primarily affect middle-aged patients in the third decade.<sup>[4]</sup>

Patients having residual cyst are usually asymptomatic and expansion of jaw or pain in case of secondary infection. the cyst may get infected and discharge purulent material through a sinus opening.<sup>[1]</sup> Pathogenesis of residual cyst The process is initiated by the spread of bacteria from a non-vital tooth in the periapical region of the jaw. If untreated, this infection leads to the formation of a periapical granuloma which contains activated T cells that produce cytokines. These cytokines act on the epithelial remnants leading to proliferation of these remnants and differentiation into cyst formation.<sup>[4]</sup> Residual cyst is discovered on radiographic examination of an edentulous area and radiological features includes round to oval well defined radiolucency with corticated border in the area of previous radicular cyst.<sup>[1]</sup> lumen shows radiopacity indicative of dystrophic calcification and can cause tooth displacement or resorption. The histology of the lining is a nondescript stratified squamous epithelium. The epithelium of residual cyst originates from the epithelial rests of Malassez, although, in some instances, it arises from the respiratory epithelium of the maxillary sinus when the periapical lesion communicates with the sinus wall.<sup>[5]</sup>

Treatment and prognosis: Types of treatment that can be conducted for the residual cyst is either marsupialisation or enucleation depending on the size of the cyst. the cyst should be curetted thoroughly and the lining should be subjected to histopathological examination. Usually, this cyst does not recur if the inflammatory foci near the cyst are eliminated.

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