



**“TUMOUR HISTOPATHOLOGY AS A PREDICTOR OF
LYMPH NODE STATUS IN ORAL SQUAMOUS CELL CARCINOMA”**

By

Dr. KHWAJA TAHURA HANEEF

Dissertation submitted to the
Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore

In partial fulfilment
of the requirements for the degree of

MASTER OF DENTAL SURGERY (M.D.S.)

In

T-01081

**ORAL AND MAXILLOFACIAL PATHOLOGY
AND MICROBIOLOGY**

Under the guidance of

Dr. AMSAVARDANI TAYAAR @ PADMINI. S

**DEPARTMENT OF ORAL PATHOLOGY
S.D.M. COLLEGE OF DENTAL SCIENCES & HOSPITAL,
DHARWAD**

APRIL 2015

Rajiv Gandhi University of Health Sciences, Karnataka, Bangalore



ABSTRACT

Background and purpose

Oral squamous cell carcinoma (OSCC) is the most frequent malignancy in the mouth. Substantial data exists stating that cervical lymph node metastasis (LNM) has a major influence on survival. Since most aggressive cells lie in the tumour invasive front, the best prognostic information about OSCC could be provided by these cells. The study thus evaluated the clinical and histological parameters that would best associate with LNM in OSCC.

Methodology

A review of records and histological examination of non-recurrent surgically treated 182 OSCC specimens was undertaken. The study utilized 100 nodal negative and 82 nodal positive cases. The parameters recorded were age, gender, habits, site and size of tumour, clinical growth pattern, premalignant status, and nodal status. Histologically, tumour was assessed according to Bryne's IFG system. The data was subjected to suitable statistical analysis.

Results

None of the clinical or histological parameters, with the exception for pattern of invasion ($p=0.000$), modified degree of keratinization & nuclear polymorphism ($p=0.041$, 0.022 respectively) and total malignancy score for survival ($p=0.013$) showed a significant association with nodal status.

Conclusion

The factor that is primarily a manifestation of tumour and its micro-environment has taken the prime seat followed by the ones that are dictated by the tumour. The factors that are basically quantified were not able to show association. Site influences the nodal status alongside pattern of invasion.

Keywords: oral squamous cell carcinoma; clinical parameters; histopathological grading; Bryne's invasive front grading system; lymph node metastasis