"INCIDENCE OF CYSTIC PATHOSIS WITH RESPECT TO IMPACTED LOWER THIRD MOLARS"

By

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Under the guidance of

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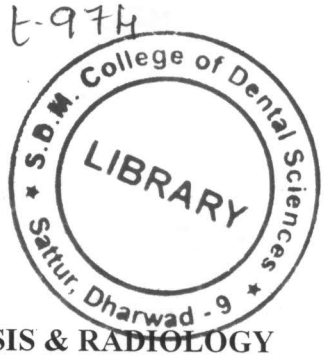

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OBJECTIVE:

The objective of this study was to assess the incidence of cystic changes in the impacted lower third molar (ILTM) in which the radiographically measured pericoronal (follicular) space is less than 2.5 mm. The relation between the cystic changes and patient's age, sex, and angular position and contact of ILTM with adjacent tooth was also evaluated.

MATERIALS AND METHODS:

Samples were collected from the 73 patient with problem regarding ILTM. Follicular space less than 2.5 mm as measured from the panoramic radiograph was included in the study. Follicular tissue samples were collected during the extraction of impacted lower third molar and were examined histopathologically. Then the data were analyzed for associations with age, sex, angular position and contact of the ILTM with adjacent tooth.

RESULTS:

There were 37 male and 36 female patients, age ranging from 17 to 35 years (mean 23.95 years). 17 (23.3%) of the 73 specimens showed cystic changes, among them 16 (22.1%) showed dentigerous cysts and 1(1.2%) showed odontogenic keratocyst. Most of the cystic changes occurred in 26-30 year age range. The cystic changes showed male predominance but could not gain statistical significance ($p > 0.05$). The relation between

cystic changes and angular position was statistically significant ($p < 0.05$). Higher probability of cystic changes was found in distoangular positioned ILTM. The relation between cystic changes and communication of ILTM with the second molar was not statistically significant ($p > 0.05$).

CONCLUSION:

Cystic changes may be encountered in the histopathologic examination of specimen collected from the ILTM of which follicular space was less than 2.5 mm. Incidence of cystic changes in ILTM justifies extraction of the impacted tooth associated with symptoms. The decision to extract or not to extract impacted third molar should be individualized, rather than generalized.