

ARTERIOVENOUS MALFORMATION EMBOLIZATION PRIOR TO DENTAL EXTRACTIONS IN A PATIENT WITH STURGE-WEBER SYNDROME

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INTRODUCTION

Encephalotrigeminal angiomas, also known as Sturge-Weber syndrome (SWS), is a rare non-hereditary developmental condition characterized by hamartomatous vascular proliferation involving the tissues of the brain and face. Patients with this condition are born with capillary vascular malformations in the face, usually following the affected trigeminal nerve distribution unilaterally, known as port wine stains, due to their purplish color. The most common brain changes are leptomeningeal venous angiomas that overlap the ipsilateral cerebral cortex, forming gyriform calcifications. Intra-oral alterations include hypervascular changes in the ipsilateral mucosa, with the appearance of gingival hyperplasia or hemangiomas similar to pyogenic granuloma.

CASE REPORT

A 21-year-old woman attended the clinic complaining about pain in the right posterior mandibular teeth. She had a confirmed diagnosis of SWS when she was five years old. Physical examination showed port wine stains on the right hemiface, hyperplastic enlargement of the gingiva on the affected side and severe tooth mobility of the right mandibular molars and premolars, which also had spontaneous bleeding. Panoramic radiography revealed hyperplasia of the right mandibular body compared to the contralateral side. After requesting Vascular Surgery's opinion, an angiotomography was performed and an arteriovenous malformation (AVM) was found in the lingual artery that would require previous embolization to perform multiple tooth extractions. Forty eight hours after embolization, multiple exodontias were performed under general anesthesia and a hemostatic was used as a socket to retain the clot along with the absorbable sutures.



Figs. 1 and 2. Extraoral view of port wine stains.



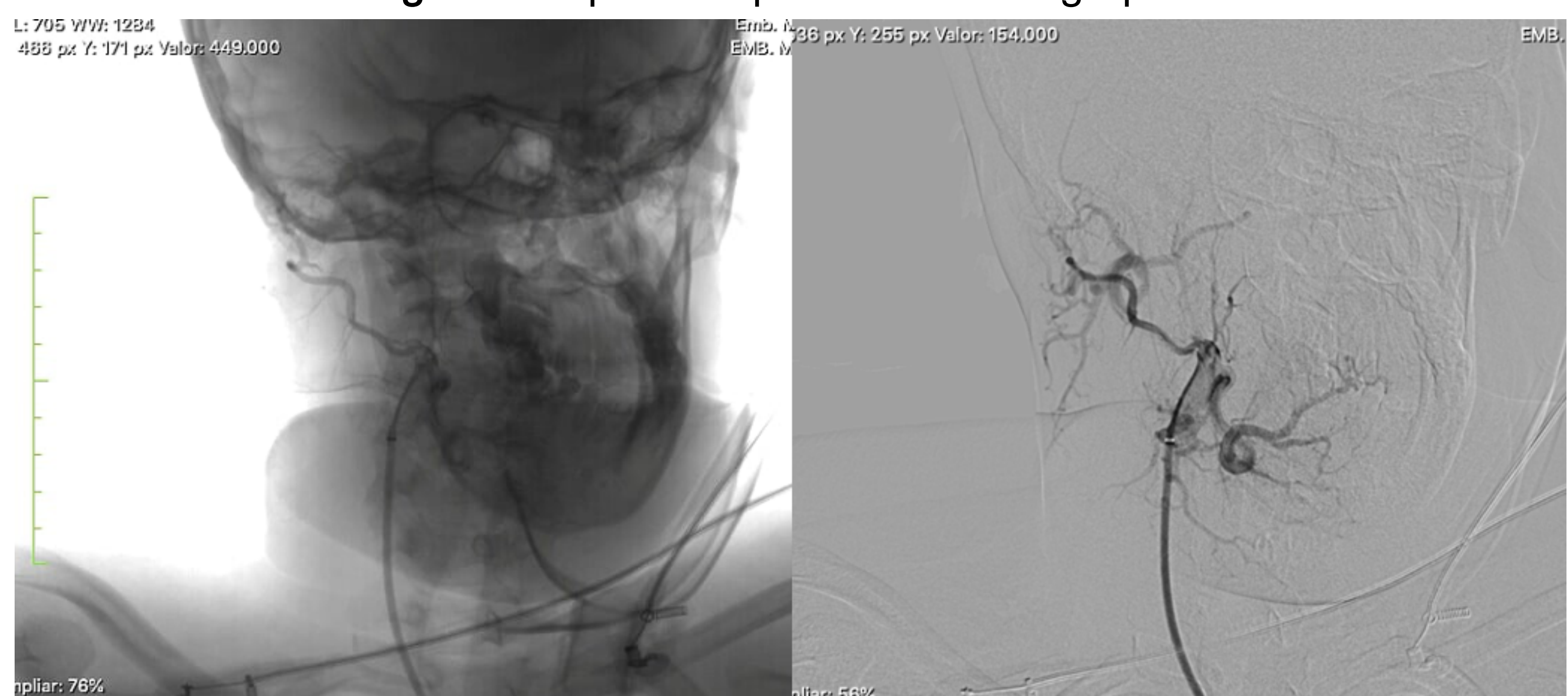
Fig. 3. Preoperative intraoral view.



Fig. 4. Preoperative panoramic radiograph.



Fig. 5. Postoperative panoramic radiograph.



Figs 6 and 7. Preoperative angiotomography revealing the AVM in the lingual artery.



Fig. 8. Postoperative intraoral view.

CONCLUSION

Whenever there is suspicion of the presence of vascular malformations, angiotomography should be performed to investigate the presence of any AVMs that may cause undesirable intraoperative complications in maxillofacial surgical procedures. Authors declare there is no conflicts of interest.