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Recurrent Oral Verrucous Carcinoma on Left Jaw Following Post-Resection of Oral Squamous Cell Carcinoma on the Right Jaw: A Case Report and the Possible Links Which Needs Further Studies

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Abstract:

A 72 year old patient refer to our hospital with a complain of growth on the lower left jaw since 9 months back.Patient had undergone surgical resection on the right lower jaw 10 years back with a histopathological report of squamous cell carcinoma.A biopsy was taken on the left jaw and was diagnosed as Verrucous carcinoma.

Keywords: verrucous,Human papilloma virus ,histopathological,lymphadenopathy

Introduction:

Oral cancer is one of the most prevalent cancer in India India has the highest cancer rate in the world .The most common cancer being the tongue .Squamous cell carcinoma being the most common histopathological findings Verrucous carcinoma seems to have the same biological potential .There has been a link between HPV and oral cancer and there is also a possible link between our oral microbes and oral cancer apart from alcohol and tobacco.Could it be from the previous squamous cell cancer on the right jaw still remains unknown.

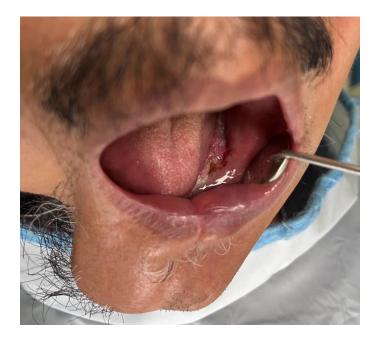
Case report:

An older male of 72 year old had a history of squamous cell carcinoma on the right which was resected around 10 years back. The patient had no history of habits after the resection. Since 2021 he started having pain and ulcerations on the left lower jaw. There was no lymphadenopathy on palpation. The patient had gone to another hospital where the biopsy report showed normal findings. After 4 months he came to our hospital and repeated the biopsy. The report shows a verrucous squamous cell carcinoma , Squamous cell carcinoma had arised from verrucous carcinoma in some literature. Since the patient had no previous history of taking tobacco products, the possible link remains unknown. Is verrucous carcinoma arising from squamous cell carcinoma from the right jaw remains unknown but, there can be a possible link and yet, biopsy was not taken from the right jaw as there was no complain and clinical findings.



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Discussions and conclusions:

The patient had no previous history of taking tobacco and have no history of smoking. Although HPV virus is associated with squamous cell carcinoma ,we could not performed this as the patient was unwilling. Hpv 16 and 18 are mostly link with malignant transformation .Most of the verrucous cancer patient had undergone resection and adjuvant radiotherapy and had no recurrence .Persistent infection in oral mucosa might increase the risk of oral cancer .It is also possible that bacterial flora in the oral cavity might contribute to ulcerations which needs larger group studies. Also, since there had been a case report of squamous cell carcinoma arising from verrucous carcinoma ,there might also be a verrucous carcinoma arising from the squamous cell carcinoma which was previously operated and yet ,if this is true ,how is it possible when there was no clinical findings on the right jaw .Could it be possible that there remains some genes or chemical that could had altered the cells on the left jaw .This needs further research on a cellular level in a proper laboratory setting and only when the link is known, one will understands how to tackle the cause.

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