

# Case Report: Comprehensive Management of Gingival Epulis

<sup>1</sup>Zarina Ehtesham and <sup>2\*</sup>Sharjeel Chaudhry

<sup>1</sup>Faculty of Health and Medical Science, Bachelor of Dental Surgery, Hamdard University, Pakistan.

<sup>2\*</sup>Dow University of Health Sciences, Mission Rd, New Labour Colony Nanakwara, Pakistan.

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**\*Corresponding Author:** Dr. Sharjeel Chaudhry, Dow University of Health Sciences, Mission Rd, New Labour Colony Nanakwara, Pakistan.

## Abstract

The 19-year-old male patient in this case report had a primary complaint of painless swelling in his upper right posterior gingiva. Clinical examination revealed smooth, sessile swellings that resembled cauliflowers. The diagnosis of gingival epulis was acquired via a differential diagnosis that included fibroma, pyogenic granuloma, and peripheral giant cell granuloma. The case got complicated because of the patient's history of dust allergies. A complete treatment plan included root cause inquiry, dental hygiene promotion, and surgical extraction under local anaesthetic. Follow-up meetings and a special prescription were part of the postoperative treatment. In order to successfully manage gingival epulis, the case underscores the requirement of rapid diagnosis, treatment, and patient compliance.

## Introduction

One of the most common characteristics of gingival diseases is gingival enlargement. However, the diagnosis of these entities becomes complicated for the clinician because of their various appearances. Based on factors such as location, size, extent, etiopathogenesis, etc., they may be divided into numerous groups. A differential diagnosis can be made employing current knowledge and

clinical experience. A definitive diagnosis or diagnosis of exclusion is subsequently made by the clinician following an extensive investigation [1]. Since the treatment of these lesions and the prevention of their recurrence depend completely on a precise diagnosis, it is very crucial. In rare cases, gingival enlargement may function as the major indicator of potentially lethal systemic disorders. In such circumstances, a precise diagnosis of these enlargements may save the patient's life or at the

very least, start treatment early and increase quality of life. One unusual event in the discipline of oral disease is gingival epulis, a localized overgrowth of the gingival tissues. The appearance, diagnosis, and course of treatment of gingival epulis in a male patient, age 19, are explored in this case report (Record No: 26936-23). Gingival epulis, which appears as painless, pedunculated swellings, is usually generated by extended exposure to irritants such as dental plaque, calculus, trauma, and iatrogenic causes [2]. The patient in this case has a history of dust allergies, which adds another degree of difficulty.

### Clinical Presentation

A 19-year-old male sought medical attention with the chief complaint of swelling in the upper right posterior region, specifically at the first and second molars of the upper right posterior region. The swellings had a smooth surface, a classic cauliflower-like appearance, and were painless and sessile. In addition, the oral health was also compromised and is accumulated dental plaque and calculus.



**Figure 1: Pre-Op**

### Differential Diagnosis

Fibroma, pyogenic granuloma, and peripheral giant cell granuloma were taken into consideration when considering the differential diagnosis. The smooth surface, sessile nature, and cauliflower-like appearance of the swellings in this case suggested to the diagnosis of gingival epulis, despite the fact that these lesions share several clinical characteristics [3].

### Discussion

#### Pathogenesis and Aetiology:

Localized gingival overgrowths that matched the clinical characteristics of gingival epulis were identified following a complete assessment. A number of etiological factors, including as trauma, trapped food particles,

accumulated dental plaque and calculus, and iatrogenic factors like improperly fitted dental equipment, can cause gingival epulis [4]. To reduce complications like functional limits, cosmetic issues, and the potential for the lesion to evolve to more aggressive forms, early diagnosis and treatment are essential [5]. The significance of taking gingival epulis into account while developing a differential diagnosis for localized gingival enlargements is underscored by this case report. The best possible results for patients are secured and potential complications are averted with timely diagnosis and care [6]. The inclusion of a dust allergy in this case adds another degree of complexity, likely impacting the oral cavity's inflammatory response.

#### Treatment Approach:

The decision to remove the gingival epulis under local anaesthetic was made to address the presenting problem

and relieve the patient's pain and discomfort. In addition to addressing the underlying reasons of the localized gingival overgrowth, the surgical intervention sought to relieve the patient's physical pain created by the swellings. Furthermore, scaling was performed to uphold oral hygiene.



**Figure 2: Post-Op**

#### **Prescription and Postoperative Care:**

A specific prescription was prepared for the patient's postoperative treatment following the successful removal of the gingival epulis. Using "Protect" mouthwash (1+0+1) and "Protect G" toothpaste (1+0+1) was part of the approach. The oral hygiene regimen that has been prescribed is essential for both the immediate postoperative care and the long-term maintenance of gingival overgrowth prevention. The patient was prescribed medications to help the healing process and minimize postoperative pain in addition to the oral hygiene regimen. We advised using the following medications: To ease postoperative pain, analgesic drugs comprising ibuprofen (400 mg every 4-6 hours, as needed for pain) was prescribed.

#### **Follow-up and Monitoring:**

Scheduling routine follow-up sessions is important for tracking the healing process and ensuring that there are no complications or recurrences. Any signs of inflammation in the patient will be thoroughly investigated and changes to the treatment strategy will be made as necessary. Additionally, these follow-up sessions enable an opportunity for patient education, reinforcing the value of

great oral hygiene practices and regular dental check-ups.

#### **Conclusion**

The patient's effective diagnosis and treatment of gingival epulis emphasizes the **right source** **light source** full clinical examination that takes into consideration the patient's medical history in addition to their presenting symptoms. The case emphasizes how important it is to address localized gingival overgrowths as soon as possible in order to prevent complications and boost overall oral health. Including a complete postoperative care prescription further underscores how important patient compliance is to get the best possible outcomes. Further inquiry into the potential links between allergic disorders and oral pathologies is important owing to the rare component of the patient's dust allergy, which adds an interesting dimension to the case. In summary, by highlighting the clinical appearance, differential diagnosis, and treatment challenges of gingival epulis, this case report advances our understanding of the illness. Every case provides important knowledge as dentistry improves, giving the route to higher patient care and more all-encompassing strategies of maintaining oral health.

## References

1. Kannan, S., Thapasum, A., Suresh, N., Muthusamy, S. and Chandrasekaran, B., 2014. Localized gingival overgrowths—differential diagnosis for dental practitioners. *Dental Update*, 41(8), pp.698-706.
2. Truschnegg, A., Acham, S., Kiefer, B., Jakse, N. and Beham, A. (2015). Epulis: a study of 92 cases with special emphasis on histopathological diagnosis and associated clinical data. *Clinical Oral Investigations*, [online] 20(7) pp.1757–1764. doi:<https://doi.org/10.1007/s00784-015-1665-3>.
3. Radanović, M. et al. (2022) “Fibrous epulis - case report,” *Biomedicinska istraživanja*, 13(1), pp. 79–84. doi:[10.5937/BII2201079R](https://doi.org/10.5937/BII2201079R).
4. Agrawal, A. (2015). Gingival enlargements: Differential diagnosis and review of literature. *World Journal of Clinical Cases*, [online] 3(9), pp.779–779. doi:<https://doi.org/10.12998/wjcc.v3.i9.779>.
5. Murali, P. and Ravichandran, U., 2021. An Unusual Occurrence of Pyogenic Granuloma. *Int J Cur Res Rev* | Vol, 13(22), p.23.
6. Buchanan, A., Abdelsayed, R., Kalathingal, S. and Kurago, Z., 2021. Radiographic Features of Intercrestal and Classic Osteosarcoma: a Report of 3 Cases. *Oral Surgery, Oral Medicine, Oral Pathology and Oral Radiology*, 132(3), P.e108.



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