

Diagnostic Challenge

An unusual cause of gum pain

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CASE HISTORY

A 32-year-old female presented to our emergency department (ED) with the chief complaint of “gum pain.” For the last 2 weeks, she had developed pain over the buccal mucosa below her first and second left lower incisors. She noted bleeding while brushing her teeth, as well as halitosis, despite regular brushing. She denied any fevers, rigors, or sweats or any trauma to the area. Her past medical history was significant for a 25-pack-year history of smoking; she currently smoked about 1.5 packs per day. She denied risk factors for human immunodeficiency virus (HIV) and was not on regular medications. She noted that she had not been to a dentist for regular oral hygiene visits in over 10 years.

On examination, the patient appeared comfortable and had normal vital signs. A head and neck examination showed a supple neck, no lymphadenopathy, and an unremarkable oropharynx. The area of concern (Figure 1) showed white ulceration at the dentogingival junction with small amounts of blood, blunting of the interproximal papillae, mild erythema, and tenderness to palpation. Bloodwork, including a complete blood count and electrolytes, was within normal limits.



Figure 1. The patient presented with ulcerated and blunted interdental papillae along her mandibular buccal mucosa. 1 = areas of destruction of papilla and craters; 2 = swollen and inflamed papillae.

QUESTION

What is the most likely diagnosis?

- a) Chronic gingivitis
- b) Aphthous ulcer
- c) Acute necrotizing ulcerative gingivitis
- d) Periodontal abscess

For the answer to this challenge, see page 240.

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This article has not been peer reviewed.