Primary Malignant Melanoma of Maxillary Gingiva

Sudhir Kumar Thakur · Somen Jha · Sarabjeet Singh ·
Anubha Yadav

Received: 21 May 2010 / Accepted: 10 September 2010 / Published online: 25 September 2013
© Association of Surgeons of India 2013

Abstract Malignant melanoma of maxillary gingiva is a rare clinical entity. Mucosal melanoma is more aggressive than cutaneous form and carries comparatively poorer prognosis. High index of suspicion is required for diagnosing malignant melanoma of oral cavity. Any pigmented lesion in the oral cavity should be taken seriously by the clinician.

Keywords Malignant melanoma of oral cavity · Malignant melanoma of maxillary gingiva · Mucosal melanoma

A 54-year-old man presented to us with a growth inside the oral cavity involving the left upper jaw since the last 4 months and occasional bleeding from the growth since the last 15 days (Fig. 1). He had a history of tooth extraction 4 months back. He also mentioned noticing a small bluish black spot adjacent to the loose tooth, which was ignored by the dentist during extraction. The growth involved the whole left maxillary gingiva but did not cross the midline. It was 6×4 cm in size and covering both the aspects of alveolus. It was black in colour, soft in consistency, ulcerated and nontender. There was slight bleeding on touch. The remaining teeth attached to the growth were loose. His routine investigations were within normal limit. The incisional biopsy confirmed the clinical diagnosis of malignant melanoma. Surgery was planned for the patient, but the patient as well as attendants were not ready for the same and also refused further investigations.

Primary melanoma of the oral cavity is a rare neoplasm. The tumours are commonly found in patients older than 40 years, and there are no clinically important differences between the sexes [1]. Among the oral malignant melanoma, the most frequent site of occurrence are the palate and maxillary gingiva followed by the mandibular gingiva, the buccal mucosa, the tongue and the floor of the mouth [2]. The excisional or incisional biopsy in large growth is the gold standard in the diagnosis of melanoma in general. Whether the lesion is primary malignant or a secondary one from occult cutaneous lesion may affect the management and outcome of the tumour. Billings et al. found that all metastatic lesions lacked evidence of junctional activity in the overlying mucosa and showed no epidermal migration [3]. About 10 % of oral melanoma may be amelanomatic and it can be diagnosed by immunohistochemical studies showing S-100 protein, MART-1 and HMB-45 reactivity [4]. The primary mode of treatment of the malignant melanoma is surgical excision. Mucosal melanoma is more aggressive than cutaneous form, which is reflected in low survival rate [5]. We conclude with the message that any pigmented lesion in the oral cavity should be taken seriously, and since malignant melanoma of oral cavity is a rare disease, a high index of suspicion is needed for its diagnosis.

Fig. 1 Intraoral photograph showing a big black, ulcerated growth involving the left side of maxillary gingiva

S. Jha · S. Singh · A. Yadav
Santosh Medical College, Delhi, India

S. K. Thakur (✉)
Dept. of Surgery, Sri Guru Ram Rai Institute of Medical Sciences,
Patelnagar, Dehradun 248001, India
e-mail: thakur_sk@rediffmail.com

Acknowledgments We are thankful to the Superintendent of Santosh Medical College Hospital, Dr. Tripta Bhagat, for her kind cooperation and permission to publish the case report.

References

1. Khalifa H, Abdullah S, Sallam K, Khalil H, Moneim IA, Elaffandi A (2009) Primary malignant melanoma of the tongue. *Can J Surg* 52: e309–e311
2. Shah J, Jain M (2006) Malignant melanoma of the oral cavity: report of two cases. *J Oral Maxillofac Pathol* 10:24–27
3. Billings K, Wang M, Sercarz J, Fu Y (1995) Clinical and pathologic distinction between primary and metastatic mucosal melanoma of the head and neck. *Otolaryngol Head Neck Surg* 112:700–706
4. Hashemi Pour MS (2008) Malignant melanoma of the oral cavity: a review of literature. *Indian J Dent Res* 19:47–51
5. Perrotti V, Piattelli A, Rubini C, Fioroni M, Petrone G (2004) Malignant melanoma of the maxillary gingiva: a case report. *J Periodontol* 75:1724–1727