CLINICAL MIMICRY: WHEN THE CLINIC CONFUSES A REPORT OF TWO CASES OF PARACOCCIDIOIDOMYCOSIS. *ANA CAROLINE DE AGUIAR BRUNO, RAFAEL NETTO, HELENA AYRES ALONSO DOS SANTOS, MARIA JULIANA NETTO VILELA MAIOLI, ALINE CORREA ABRAHÃO, ELISA RANGEL JANINI, VALDIR MEIRELLES JUNIOR.*

Paracoccidioidomycosis, a deep infection caused by the dimorphic fungus, *Paracoccidioides brasiliensis*, occurs endemically in different rural areas of Brazil. Late diagnosis or poorly conducted treatment can result in death, emphasizing the importance of a rapid and accurate diagnosis and correct treatment. The authors report 2 cases, the first involving a 40-year-old Caucasian man, a smoker for more than 10 years, presenting with ulcerated lesions, with raised borders, of approximately 4 cm, with 30 days of evolution, in the anterior third of the tongue, which did not heal; the second, a 22-year-old Caucasian woman, with lesions on the bilateral soft palate, with an evolution of 2 months. The initial diagnoses for both the cases were pemphigus and lichen planus. Reports of incisional biopsies of both the patients indicated paracoccidioidomycosis. The patients were referred to the infectology service for systemic evaluation and treatment. Currently, they are free of the disease.

MULTIPLE BUCCAL LESIONS TREATED WITH CRYOSURGERY. *PAULO DE CAMARGO MORAES, LUIS ALEXANDRE THOMAZ, ANDREA MENEGHETT MENEGHETTI, RUBENS G. TEIXEIRA, DANIELA PRATA TACHELLI, JOSE LUIS C. JUNQUEIRA, VICTOR MONTALLI.*

Liquid nitrogen, obtained by the distillation of liquid air, is used in cryogenics since it condenses to −196°C at atmospheric pressure. Cryosurgery is based on the osmotic pressure difference, during the freezing and thawing cycles with liquid nitrogen, leading to intracellular edema, with the consequent rupture of the cell membrane, leading to apoptosis. The technique is simple, easy to perform, dispensing with the use of anesthetics, and with excellent aesthetic result. The technique involves the use of a cryotherapy probe, and several cycles of freezing and thawing are performed. The patients are re-evaluated after 15 days; if necessary, other sessions may be required. In these cases, the average was obtained from 3 sessions, with 4 to 5 cycles per consultation. Extensive lesions may require prolonged treatment for a few months. We will show some lesions treated with cryosurgery such as ranula, mucocele, hemangiomas, pyogenic granuloma, and varicosities, among others.

PERIAPICAL CYST ARISING FROM A PALATOGINGIVAL GROOVE: A CLINICAL CASE REPORT. *MAYARA BARBOSA VIANDELLI MUNDIM-PICOLI, BRUNNO SANTOS DE FREITAS SILVA, HELDER FERNANDES DE OLIVEIRA, SATIRO WATANABE, ROGÉRIO ROBEIRO DE PAIVA, WILSON JOSÉ MARIANO-JÚNIOR, CAROLINA CINTRA GOMES.*

A 17-year-old woman visited a dental clinic with complaints of mobility in tooth 22. The intraoral examination revealed a tooth with healthy crown, discrete periapical region volume increase, and negative response to cold stimulus. The periapical radiograph showed a wide area of periapical bone rarefaction involving the region of teeth 21 and 22 and mesial portion of tooth 23. A cone beam computed tomography analysis showed rupture of the vestibular cortical bone and presence of palatogingival groove with a communication between the pulp with the periodontal ligament. Endodontic treatment was performed to promote infection control. In view of the associated extensive lesion, an aspiration puncture was performed, with the collection of a yellow-citrine fluid, excisional biopsy of the cystic lesion, apicectomy, and retrobturation. A histopathological examination revealed an epithelial lining and a capsule formed by fibrous connective tissue, compatible with a periapical cyst. Additional investigations suggest repair of the affected area.

MANDIBULAR METASTASIS OF A PROSTATIC ADENOCARCINOMA: A CASE REPORT. *GABRIEL CAMPOS LOUZEIRO, DIENI DA SILVEIRA TEIXEIRA, MARIA EDUARDA BALDINO, MARIANA KLEIN, KAREN CHERUBINI, MARIA ANTONIA FIGUEIREDO, FERNANDA SALUM.*

Prostate cancer metastases are common, especially in the regional lymph nodes and bone tissues, however, are rare in the jaw. A 78-year-old man was referred by an oncology service for complaints of pain in the mandible. The patient had a history of prostatic adenocarcinoma treated with radiotherapy 16 years prior. Liver and pulmonary metastases were detected 1 year ago, and the patient is currently in chemotherapy treatment. A physical exam revealed a diffuse tumor mass involving all of the lower dental arches with buccal, lingual growth. A computed tomography scan of the region demonstrated neoplastic lesions throughout the mandibular bone structure, involving the bodies and ramus, bilaterally. The histopathological examination revealed proliferation on neoplastic tumor cells compatible with undifferentiated carcinoma. Immunohistochemical analysis showed a positive reaction to antibodies CK, EMA, androgen receptor, and PSA, compatible with metastatic prostatic adenocarcinoma. Chemotherapy-induced tumor reduction is awaited for the initiation of palliative radiotherapy.

PARANEOPLASTIC PEMPHIGUS ASSOCIATED WITH LYMPHOID LEUKEMIA: A CASE OF PERSISTENT AND REFRACTORY ORAL ULCERATIONS. *MARIA CECÍLIA QUERIDO DE OLIVEIRA, ANA CLAUDIA LUIZ, BRUNO FELIPE GAIA DOS SANTOS, THAIS BIANCA BRANDÃO, ALEXANDRE MARQUES PÉRIGO, ANA CAROLINA PRADO RIBEIRO.*

A 53-year-old man was diagnosed with chronic lymphoid leukemia in December 2016 and was subjected to FCR-Lite protocol (cyclophosphamide 249 mg/m^2 and fludarabine 33.2 mg/m^2) in January 2017. The patient developed exanthema on the skin (torso and lower members), bullous lesions on the feet, and ulcers in the oral mucosa. Initially, the diagnosis was pharmacodermia and mucositis, rendered by oncologists. The dental team prescribed 0.12% alcohol-free chlorhexidine associated with low-level laser therapy for analgesia. The oral lesions have persisted with an increased extension and bleeding in the lips. Therefore, an incisional biopsy of skin lesions was performed and revealed intraepidermal vesicles, which supported the initial hypothesis of pharmacodermia. Due to persistence of the oral lesions, paraneoplastic pemphigus was suggested by the dental team as a diagnostic hypothesis and confirmed after an incisional biopsy and immunofluorescence assay. A 2-week follow-up revealed improvement of oral lesions, and no pain symptoms were reported.