

The present case shows an atypical manifestation that may have occurred due to delay in seeking treatment. However, it did not affect the prognosis, which was good. The lesion is being monitored and has not recurred.

**ORBITAL DEFECT RESOLUTION WITH OCULAR PROSTHESIS: A CASE REPORT.** *ALINE DOS SANTOS QUEIROZ DE ALMEIDA, RODRIGO SALAZAR-GAMARRA.*

The loss of an eye is disturbing and affects social interaction. Rehabilitation with prosthesis restores comfort, aesthetics, and confidence, improving the quality of life. This study aims to report a case of rehabilitation using ocular prosthesis of an unilateral anophthalmic cavity. An impression of the socket was made with irreversible hydrocolloid material. An acrylic resin was used for flasking and packing. The obtained artificial sclera was tested and adjusted in the patient for functional and aesthetic performance of eyelid function and facial harmony. An iris was painted and centralized into a plateau of the sclera, before performing specific characterization. The ocular prosthesis was polished and installed. The patient was instructed on maintenance and hygiene. Facial aesthetics were restored; function of eyelid muscles and tear direction were restored jointly for integration of the individual into his social life.

**TREATMENT OF HALITOSIS AND DYSGEUSIA IN A PATIENT WITH CEREBELLAR HEMANGIOBLASTOMA WHO UNDERWENT RADIOTHERAPY.** *SANDRA KIRCHMAYER, FABIANA F. BOMBARDA, MARIELLA GOTTARDI.*

Halitosis refers to exhalation of air offensive to human olfaction, due to the presence of volatile sulfur compounds, through the mouth and/or nose. Dysgeusia manifests as a sensory-perceptive or chemosensory alteration caused by physiological or non-physiological events that modify the perception of taste. Both may present as a sequela of radiotherapy treatment. A 56-year-old man presented with a complaint of halitosis and dysgeusia. The medical history showed that he had cerebellar hemangioblastoma (which is a benign, slow-growing tumor in the cerebellum) controlled with drug therapy in association with radiation therapy, about 11 years prior. The dental management included a treatment protocol for halitosis with salivary flow restoration and control of the saburral tongue, in addition to the use of a vitamin supplement containing zinc. The results confirmed a significant improvement in both the breath (reported by the patient's wife) and taste (reported by the patient).

**DIAGNOSTIC CHALLENGE OF LEUKOPLASTIC LESION IN TONGUE: A CASE REPORT.** *MARLA SMILLE PEDROSA CRUZ RIBEIRO, MÁRCIO CAMPOS OLIVEIRA, GABRIEL LEVI DA SILVA CUNHA, VALÉRIA SOUZA FREITAS, JENERS GONÇALVES FARIAS, JOANA DOURADO MARTINS CERQUEIRA, TARSILA CARVALHO FREITAS RAMOS.*

Individuals with oral candidiasis may exhibit white plaques that are not removable by scraping, and the term associated with this condition is chronic hyperplastic candidiasis. A 27-year-old woman sought dental care at a reference center for evaluation of a white spot on the tongue. On intraoral clinical examination, a whitish, plaque-like lesion was detected over the entire tongue surface, compatible with leukoplakia. The patient reported that the lesion was painless and had appeared about 3 years prior. An incisional biopsy was performed. The sections showed fragments

of oral mucosa coated by parakeratinized stratified squamous epithelium, showing marked hyperkeratosis and rounded and basophilic structures compatible with yeasts. The specimen was also subjected to Grocott-Gomori methenamine-silver nitrate staining, and proliferating yeast structures were observed. The diagnosis was compatible with hyperkeratosis associated with fungal infection. The patient was monitored and regression of the lesion was noted after treatment with Nizoral for 3 weeks.

**SYPHILIS DIAGNOSED AT THE DENTIST'S OFFICE: REPORT OF 2 CASES WITH ORAL MANIFESTATIONS.** *EDNA DE ANDRADE, JEFERSON RIBEIRO MÁXIMO, MARISA SUGAYA, JULIANA RAFUL SOARES, TATIANA RIBEIRO DE CAMPOS MELLO, DESIREE ROSA CAVALCANTI.*

The objective of this study is to report 2 cases of syphilis with oral lesions. Case 1 refers to a 22-year-old woman, with a complaint of mouth pain for 21 days. On oral examination, areas of erythematous lesions surrounded by whitish patches were observed in the labial mucosa and gingiva. Case 2 refers to a 28-year-old white woman, homeless and a drug addict, with a complaint of mouth pain for 2 months. An oral examination revealed large white patches in the labial, buccal, and gingival mucosa. Additionally, condylomatous lesions were found. Histopathological analysis as well as laboratory tests confirmed the diagnosis. The first patient showed regression of oral lesions 20 days after treatment initiation. The second patient was treated by health professionals for the homeless population but did not return for reevaluation. Primary care dentists have examined syphilis patients and can provide early diagnosis by identifying its oral manifestations.

**SIALOLITHIASIS IN AN ACCESSORY SALIVARY GLAND.** *LETICIA SPINELLI JACOBY, MARIA NOEL MARZANO RODRIGUES PETRUZZI, FERNANDA SALUM, KAREN CHERUBINI, MARIA ANTONIA FIGUEIREDO.*

A 12-year-old white female patient reported discomfort in the lower lip, with a 1-year evolution. No previous treatment or history of trauma in the region had been reported. On a physical examination, a small nodule was observed in the right lower labial mucosa. Clinically, the condition was compatible with sialadenitis of the salivary gland. An excisional biopsy was performed, and the histopathological diagnosis was sialadenitis due to sialolithiasis.

**UREMIC LEONTIASIS OSSEA IN A CHILD: A CASE REPORT.** *CAROLINA RODRIGUES TEÓFILO, LUIZ ANDRÉ CAVALCANTE BRIZENO, MALENA REGINA DE FREITAS E SILVA, PHILLIPE NOGUEIRA BARBOSA ALENCAR, TACIO PINHEIRO BEZERRA, ANA PAULA NEGREIROS NUNES ALVES, FABRICIO BITU SOUZA.*

Leontiasis ossea (LO) involves facial and cranial bone hypertrophy associated with a group of diseases, and rarely occurs in patients with chronic renal failure. Few cases of LO have been reported in the literature, but none in patients below 18 years of age. A 14-year-old girl was referred for our service showing enlargement of the jaws and facial bones, with pain and tooth mobility. Renal failure and secondary hyperparathyroidism were reported in the medical history. The imagologic examination showed