

# Gingival Enlargement

## (A case report and discussion)



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### Abstract

Oral cavity is considered as the mirror of the individual health. Gingival is one of the most sensitive and delicate tissue in the oral cavity and body as a whole and with the changes visible at the slightest of changes in metabolic, hormonal and nutritional level in many systemic diseases .

Gingival enlargement is a commonly encountered problem in the dental clinics. It may signify anything from the simple inflammatory enlargement to the leukemia or benign tumor depending upon the history , clinical features etc.

### Case Report

Present case is of 18 year old female who presented in my clinic with chief complaint of enlarged gingival for the past 6-8 months. There was no pain but the appearance was highly anesthetic.

### History and examination

Patient noticed this enlargement 6-8 months back which has gradually increased in size over the period . it was painless with intermittent bleeding spontaneously or on getting slightly traumatized as in tooth brushing. She gave no history of past dental treatment. General physical health was satisfactory except for the fact that she was slightly anemic. There were no significant dental findings except plaque and sub gingival calculus. **The significant part of the history was that patient was on anti epileptic medication (phenytoin) for the past one and a half year .**

### Local examination

Painless, bead like enlargement of the gingiva, mainly interdental, extending to facial and lingual is seen. Local irritants were present but were not corresponding to the amount of enlargement. Enlargement was generalized but more pronounced in the maxillary and mandibular anterior region. Adjoining structures like mucosa were normal in color and consistency.

### Diagnosis

As the gingival enlargement was seemed to be combined (non inflammatory and inflammatory) in nature so differential diagnosis includes

1. Drug induced gingival enlargement
2. Leukemic enlargement
3. Idiopathic

Haemogram was conducted . blood picture was found to be normal which excluded leukemia. An obvious cause was there (phenytoin) and it had begun after the patient started with the drug therapy so calling it idiopathic was not justifiable. The diagnosis was thus established as drug influenced gingival enlargement.

### Treatment

Internal bevel gingivectomy / undisplaced flap surgery was done to remove excess fibrotic tissue along with removal of local irritants. This procedure was done

due to two reasons -

1. Enough of attached gingiva was present and it was also enlarged .
2. There was significant bone loss.  
Otherwise only external bevel gingivectomy was treatment of choice.

### Discussion- Gingival enlargement can be classified as

1. Inflammatory enlargement
2. Drug induced enlargement
3. Enlargement associated with systemic diseases
4. Neoplastic enlargement
5. False enlargement

For a general practitioner it should first be ascertained that whether the enlargement is inflammatory, non inflammatory or combined. In case it is inflammatory differential diagnosis could be made

1. Severe gingivitis
2. Physiologic phenomenon like pregnancy, puberty.
3. Vit. C deficiency
4. Pyogenic granuloma

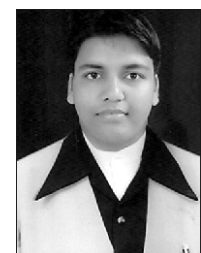
In case it is non - inflammatory in nature then the , differential diagnosis can be

1. Drug influenced gingival enlargement
2. Benign tumor
3. Granulomatous disease
4. Idiopathic

Generally the enlargement seen is of combined type because even if it is non-inflammatory overgrowth makes the oral hygiene maintenance difficult hence there is secondary inflammatory enlargement.

By taking careful history and doing a close clinical examination, it is not difficult to ascertain diagnosis pattern of enlargement.

In case of doubt a specialist can be consulted and routine investigation performed changes in gingival or oral cavity could be the first sign or manifestation of some severe underlying systemic problem . if we can pick them early , it might prove detrimental to overall prognosis of disease.



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