

Case of Dentigerous Cyst on Wisdom tooth

By Kenneth D'Aran

What is a dentigerous cyst?

The second most common tooth derived cyst, is the dentigerous cyst, which develops around the crown of an unerupted tooth.

What are the causes of a dentigerous cyst?

It is most frequently found in areas where unerupted teeth are found: wisdom teeth and upper jaw canines, in decreasing order of frequency.

What are the signs and symptoms of a dentigerous cyst?

The cysts can grow very large and can move teeth but more commonly, they are relatively small.

Most dentigerous cysts are asymptomatic and their finding is an incidental finding on taking an X-ray of the mouth.

Dentigerous cyst can become quite large and can place the patient at risk of a pathological jaw fracture.

*<http://www.exodontia.info/DentigerousCyst.html>

Case:

14.10.13 Female, aged 36, presented with dentigerous cyst on lower right wisdom tooth, diagnosed via X-ray. She could feel a blister like swelling, spongy in nature.

On investigation it was discovered that her left bottom wisdom tooth has not formed & bottom right has not come through. As a consequence of this the top two wisdom teeth are too high. Surgery was suggested but could be complicated as the root is too close to the nerve.

No other issue with teeth, no decay, no filling history, however a history of braces as a teen for overcrowding of teeth & she is concerned that this may relapse. No other health issues at present or in recent past, except a small wart on top of foot, which she has self prescribed Thuja tincture externally. She can get mouth ulcers when "run down". She is a mother of 2 toddlers.

She has been a client of mine since 1996, when she presented with Asthma < wet cold weather. Her first prescription was *Calc carb* Q3, later *Pulsatilla* & *Silica*, all helped resolve this condition over a reasonable period of time. *Ant crud* was later prescribed for some skin conditions (lips cracking & white head pimples) & later *Sulfur*.

Previous to this specific consultation I had not seen her since 2009 (4 years), when she presented with varicose veins on vulva associated with pregnancy & responded well to *Lycopodium* Q1, otherwise her health had been stable & good.

TBR₂ rubrics

ID	Rubric name (Desktop 1)	Sulf.	Calc.	Merc.	Phos.	Puls.	Bell.	Sep.	Bry.	Lyc.	Rhus.
220	Mouth (& pharynx), Teeth & Gums, Gums {220}	2	3	4	3	2	3	3	1	2	2
217	Mouth (& pharynx), Teeth & Gums, Molars {217}	1	2	1	3	2	1	2	4	2	1
1587	Generals, Skin & externals, Swellings (localised swellings of skin; tumours), Swellings (circumscribed, tumour), in general {1587}	4	2	4	3	4	3	2	4	3	4
1602	Generals, Skin & externals, Ulcers, Ulcers, in general {1602}	4	3	4	3	4	3	3	3	4	3
204	Mouth (& pharynx), Inner mouth (oral cavity) in general {204}	3	3	4	4	3	4	3	2	2	2
1558	Generals, Skin & externals, Warts, Small {1558}	3	3					1			1
291	Lower Limbs, Foot {291}	3	3	2	3	4	4	4	3	4	3
Rubric count [7]		7	7	6	6	6	6	7	6	6	7

As you can see there are no modalities with this presentation, thus the reliance on concomitant complaints, mouth ulcers & small wart on foot. Also taken into consideration, is the original positive response *Calc carb* on her health, many years ago.

The following symptoms supporting choice of *Calc-carb* from *Materia Medica Hahnemannica*; HIS materia medica republication project. Symptom number will thus vary from other editions of the Hahnemann's materia medica.)

- 478 The teeth feel as if elongated.
 * this by analogy may be considered for the enlarged upper wisdom teeth of this client..kd'

- 486 Swelling of the gums, of a hollow tooth.
489 Pustules in the gums, over one molar, like a dental fistula (after a cold?) (aft. 24d).
490. Ulcer on the gums (aft. 14d).
493 Blisters in the mouth, which break open and form ulcers (aft. 12d) (after vexation?).
494 Blisters in the mouth, and ulcers arising thence on the inside of the cheek (after catching cold?)
1475 Many very small warts appear here and there.

Therapeutically of course this medicine is to be considered for slow dentition in children & thus can be transposed in this case for slow development of her lower wisdom teeth. It is also renowned for cysts of various types. It's beneficial to see the primary source data confirming this therapeutic observation.

Rx Calc carb Q1, ud to continue

She continued the medicine until it was finished 2 months later, the swelling and cyst had disappeared. Not aware of any swelling/cyst returning, so she delayed visit to dentist till March 2015. CT scan could find no trace of dentigerous cyst, thus no operative procedure needed.

Wisdom teeth are still impacted but not an issue at this stage. No mouth ulcers since treatment. Patient still has one small wart on foot but not concerned. She doesn't desire further treatment at this time regardless of the potential of supporting the development of the two wisdom teeth that have still not come through.

I would suggest the use of *Calc carb* in ascending Q potencies over a longer period of time. Her health remains stable, well.