



## Case Report

### RETROCUSPID PAPILLA: A CASE REPORT

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#### ABSTRACT

Retrocuspid papilla is small tissue tag located on the mandibular gingiva lingual to the cuspid teeth; usually occurs bilaterally, is more commonly identified in children, and is considered a normal anatomic structure.

**Keywords:** Retrocuspid papilla, mandibular gingival, cuspid teeth

#### INTRODUCTION

A retrocuspid papilla is a sessile nodule with a smooth or stippled surface that generally occurs on lingual attached gingiva, adjacent to mandibular canines. Not associated with any causative factor. It generally ranges from 2-4 mm in diameter, mostly found in young individuals and regresses with age. Though well documented in literature but very few cases have been reported. Here we report a case of a retrocuspid papilla of a young male patient.

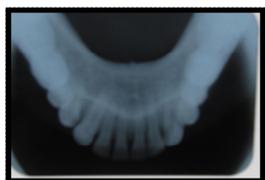
#### Case Report

A 25 year old male patient visited the OMR department of Jaipur Dental College with chief complain of pin point elevation in the lower front tooth situated lingually since 3 years. Elevation is present since 3 years without any associated history of fever or pain. Extra oral examination was normal and intra orally, a whitish elevated lesion seen on the lingual aspect of the 33 on attached gingiva; approx. 2 cm in diameter round in shape with adjacent area being normal; on palpation non tender elevated, immobile, not attached to the underlying structures and non compressible.



**Figure 1:** Pinpoint elevation present lingual to 33

Based on clinical features provisional diagnosis of retrocuspid papilla was given. Mandibular cross sectional radiograph was advised which was normal.



**Figure 2:** Radiograph shows no evident changes

Final diagnosis given was retrocuspid papilla.

#### DISCUSSION

Retrocuspid papilla is benign nodules of the gingival tissues that occurs lingual to the mandibular canines. These nodules are distinguished at a microscopic level by stellate fibroblasts within the fibrous connective tissue. Found in young adults and children, they are considered to be a normal variation of healthy tissue and should not be biopsied.<sup>1</sup> which was same for our case. Little information is available in the literature on this entity and there are contradictory reports regarding its histologic features. Histomorphologic analysis of 30 specimens diagnosed as RCP revealed that in most cases (80 %) it is composed of loosely-arranged delicate fibrous connective tissue with stellate and multinucleated fibroblasts. Elongation of the rete ridges and/or increased vascularity is also present in a significant number of cases. Stellate and multinucleated fibroblasts are not unique to RCP and they have been described as prominent histologic features in other lesions of skin and mucous membrane. RCP is considered to be a “normal anatomical structure” or an “anatomic variation” of the gingiva. The clinical significance of RCP is that it may simulate pathological gingival conditions from which it must be differentiated.<sup>2</sup>

#### REFERENCES

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