



A RADIOLOGICAL STUDY OF SUPERNUMERARY TEETH IN POPULATION OF KASHMIR

Berjina Farooq Naqshi

Medical Officer, Deptt of Health and Medical Education, J and K, India.

Adil Bashir*

Registrar, Department of Orthopaedics, Government Medical College, Srinagar, J&K, India. *Corresponding Author

Mohammad Shafi

Dental surgeon, Deptt of Health and Medical Education, J and K, India

ABSTRACT

INTRODUCTION: Supernumerary teeth are the teeth which are present in excess of normal configuration. Supernumerary teeth are found in all areas of dental arches. They are seen in primary as well as permanent dentition, more common in permanent dentition. The aim of our study is to evaluate presence of supernumerary teeth in Kashmiri population.

MATERIALS AND METHODS: Our study was conducted on 100 digital panoramic orthopentograms (OPGs) of subjects attending the department of Oral Medicine and Radiology, Government Dental College, Srinagar.

RESULTS: The prevalence of supernumerary teeth was observed in 3 % cases. Mesiodens was seen in 2 % cases. Paramolar was seen in 1 % of cases.

CONCLUSION: Prevalence of supernumerary teeth in our study was % . They may erupt leading to various problems. These findings can be fruitful to various clinicians for proper management.

KEYWORDS : supernumerary teeth, dentition, orthopentograms.

INTRODUCTION

Any tooth material formed from tooth germ in excess of usual number is called supernumerary teeth[1]. Supernumerary teeth are seen mostly in men [2][3]. Supernumerary teeth are found in all areas of dental arches. They are seen in primary as well as permanent dentition, more common in permanent dentition[4]. Supernumerary teeth are more commonly found on maxilla than mandible[2].

Scheiner and Sampson (1997) classified supernumerary teeth as mesiodens, paramolar, parapremolar and distomolar[5]. Mesiodens are located on the maxillary midline and they represent 80% of the supernumerary teeth[6]. Mesiodens are mostly conical in shape and are located between two central incisors[7]. Distomolars are located distal to third molar. Paramolars are located adjacent to molar[8]. Parapremolars are present adjacent to premolar[2]. Cleidocranial dysplasia, cleft lip and cleft palate are the conditions which may be associated with supernumerary teeth[9].

MATERIALS AND METHODS

Our study was conducted on 100 digital panoramic orthopentograms (OPGs) of subjects attending the department of Oral Medicine and Radiology, Government Dental College, Srinagar for retrospective study of supernumerary teeth. OPGs of children were not included for the study. OPGs were read carefully for the study.

OBSERVATIONS AND RESULTS

Among 100 OPGs, the prevalence of supernumerary teeth was observed in 3 % cases of which 2% were located in maxilla and 1% in mandible. Mesiodens was seen in 2 % cases(Fig1). Paramolar was seen in 1 % (Fig2) of cases. Distomolar and parapremolar were seen in none.



Fig1: yellow arrow showing the mesiodens in the maxilla



Fig2: black arrow showing paramolar

DISCUSSION

Supernumerary teeth occur in 0.1-3.8% population i.e. its not rare in dental practice[10-12]. In our study, maximum number of supernumerary teeth were mesiodens followed by paramolars. Our study is coherent with the study of Gopal Kumar et al(2014)[13]. Prevalence of supranumerary teeth in our case was % which was not coherent with the study of Fardi et al (2011) whose result was 1.8%[14]. During a survey in school children, Brook(1974) found that percentage of supernumerary teeth was more in permanent dentition rather than primary dentition[15].

Genetic and environmental disturbances can cause anomalies of teeth[16]. Supernumerary teeth may either erupt or may remain unerupted[17]. They are related to local disorders like displacement. Whenever there is a problem, they need to be extracted [18].

CONCLUSION

If the supernumerary teeth remain impacted, various complications can occur. Therefore, clinical and radiological know how is important to manage the patients in a better way.

Conflicts of interests: None.

REFERENCES

1. Shafer WG, Hine MK, Levy BM. A textbook of oral pathology. 4th edition. Philadelphia: W.B. Saunders, 1983.
2. Rajab LD, Hamdan MA. Supernumerary teeth: review of literature and a survey of 152 cases. *Int. J. Paediatr Dent.* 2002;12:244-54.
3. Mitchell L. Supernumerary teeth. *Dent Update.* 1989;16(2):65-9.
4. Burzynski NJ, Escobar VH. Classification and genetics of numeric anomalies of dentition. *Birth Defects Orig Artic Ser.* 1983;19:95-106.
5. Scheiner MA, Sampson WJ. Supernumerary teeth: a review of the literature and four case reports. *Aust Dent J.* 1997;42:160-5.
6. Danalli DN, Buzzato JF, Braum TW, Murphy SM. Long term interdisciplinary management of multiple mesiodens and delayed eruption: report of a case. *J Dent Child.* 1988;55:376-80.
7. Bolk L. The supernumerary upper incisors of man. *Deutsch Mschr Zahnheilk.* 1917;35:185-228.
8. Bolk L. Supernumerary teeth in molar region in man. *Dental Cosmos.* 1914;56:154-67.
9. Zilberman Y, Malron M, Shteyer A. Assessment of 100 children in Jerusalem with supernumerary teeth in the premaxillary region. *ASDC JDent Assoc.* 1990;56:147-9.
10. Backman B, Wahlin YB. Variations in number and morphology of permanent teeth in 7 year old Swedish children. *Int J Paediatr Dent.* 2001;11(1):11-7.
11. Salem G. Prevalence of selected dental anomalies in Saudi children from Gizan region. *Community Dent Oral Epidemiol.* 1989;17(3):162-3.
12. Luten JR Jr. The prevalence of supernumerary teeth in primary and mixed dentitions. *J Dent Child.* 1967;34(5):346-53.
13. Gopakumar D, Thomas J, Ranimol P, Vineet DA, Thomas S, Nair VV. Prevalence of supernumerary teeth in permanent dentition among patients attending a dental college in South Kerala: A pilot study. *J Indian Acad Oral Med Radiol.* 2014;26:42-5.
14. Fardi A, Kondylidou-Sidira A, Bachour Z, Parisi N, Tsirlis A. Incidence of impacted and supernumerary teeth - a radiographic study in a North Greek population. *Med Oral Patol Oral Cir Bucal.* 2011;16(1):e56-61.
15. Brook AH. Dental anomalies of number, form and size: their prevalence in British school children. *J Int Assoc Dent Child.* 1974;5:37-53.
16. Dhull KS, Acharya S, Ray P, Yadav S, Prabhakaran SD. Bilateral maxillary paramolars: a case report. *J Dent Child (Chic).* 2012;79(2):84-7.

17. Ferres-Padro E, Prats- armengol J, Ferres-Amat E. A descriptive study of 113 unerupted supernumerary teeth in 79 pediatric patients in Barcelona. *Med Oral Patol Oral cir Bucal*.2009;14(3):E146-52.
18. Liu DG, Zhang WL, Zhang ZY, Wu YT, Ma XC. Three dimensional evaluations of supernumerary teeth using cone-beam computed tomography for 487 cases. *Oral Surg Oral Med Oral Pathol Oral Radiol Endod*. 2007; 103(3):403-11.