



ORIGINAL RESEARCH PAPER

Radiodiagnosis

AN UNUSUAL CASE OF BIFID MANDIBULAR CONDYLE

KEY WORDS:

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ABSTRACT

Bifid mandibular condyle is a rare asymptomatic unusual presentation with no predilection for age group. The morphology of bifid mandibular condyle varies from a shallow groove to two condylar heads with separate necks.

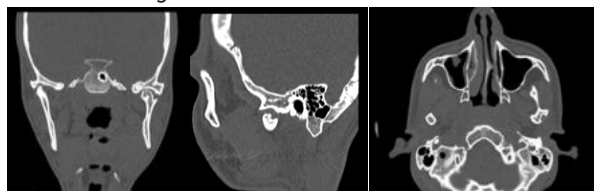
INTRODUCTION.

Duplication of the mandibular condyle is otherwise called as the bifid mandibular condyle.

It is an anomaly characterized by division of the mandibular head. Bifid mandibular condyle (BMC) is increasingly being detected due to the frequent use of improved imaging techniques, particularly CT and MRI. Most of the cases are asymptomatic. This is a poorly understood condition with regard to aetiology, clinical implications and morphology. Morphologically, a bifid mandibular condyle (BMC) may be restricted to a delicate notching on the condyle or is extended as a complete lobulation of the condyles. Extensive division might result in two heads while in cases less completed, the heads are separated simply by a shallow groove.

CASE STUDY

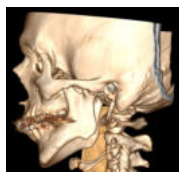
We presented a case of 22 years old male patient presented with the history of fall at the age of 10 years and now presents with the swelling in the face and deviation of mouth.



Left mandibular condylar head in the mandibular fossa appears relatively small as compared to the right with bony excrescence measuring 9 x 5.1 mm and is seen projecting laterally, abutting the zygomatic process of the temporal bone.

Cortical and medullary continuity of the bony excrescence with the right condylar head and the ramus.

The size of bilateral mandibular ramus right measuring 7.5 cm and left measuring 5.2 cm in cranio-caudal dimension with resultant deviation of the mandible to the left side. Left mandibular fossa appear relatively shallow as compared to the right.



The Three-dimensional CT image of the skull showing bifid mandibular condyle on the left.

CONCLUSION:

Bifid mandibular condyle is a rare condition and is more frequently unilateral and is typically seen incidentally on CT and MRI imaging. The nature of the developmental condition is unknown but it can be attributed to the failure of resorption of the fibrous/vascular tissue during the embryonic period and can lead to the mal-development of the mandibular condyle.

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