PEER REVIEWED

PHOTOCLINIC Torus Mandibularis and Buccal Exostoses

Volume 58 - Issue 6 - June 2018

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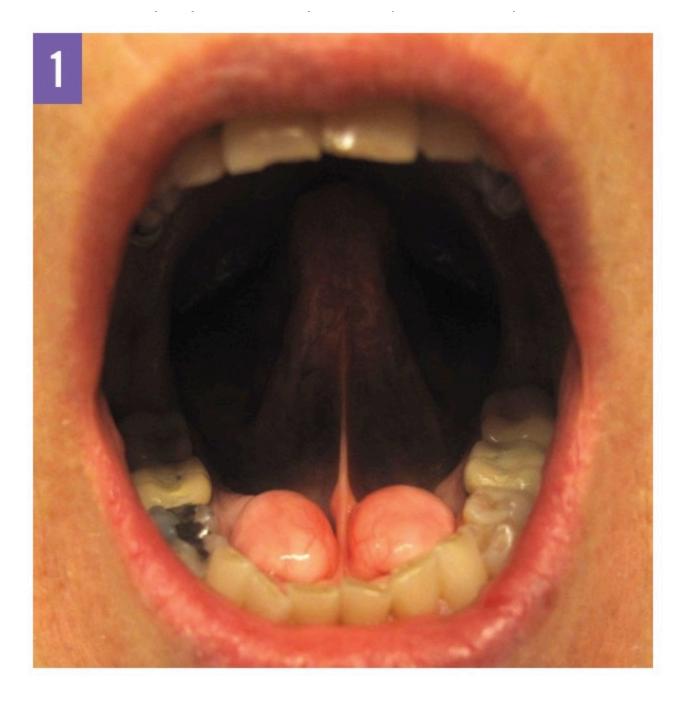
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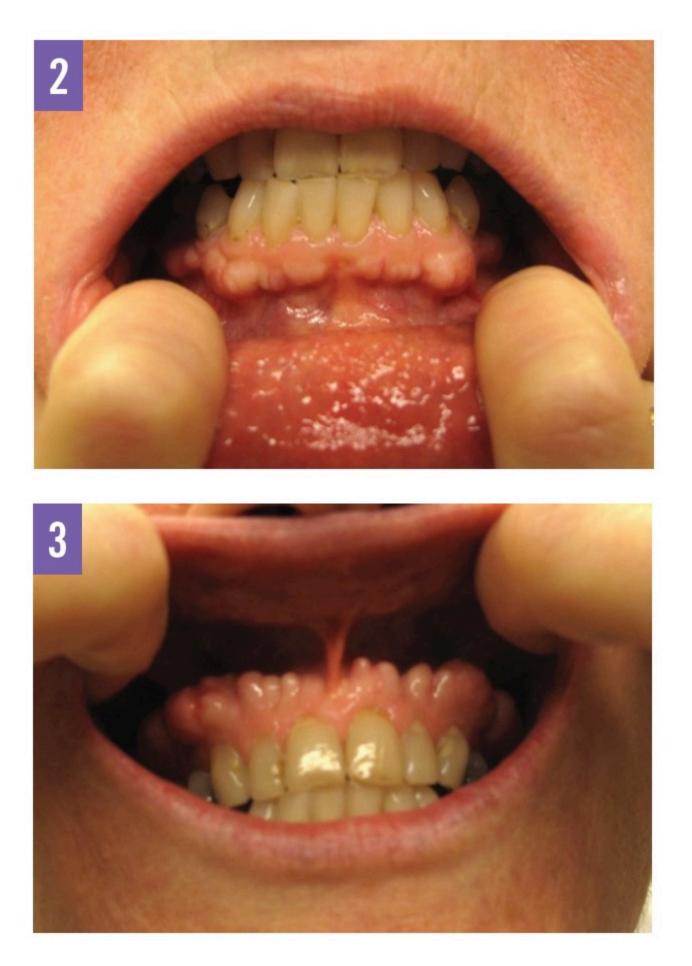
VanDyke SD, Wilson BB. Torus mandibularis and buccal exostoses. *Consultant.* 2018;58(6):e190.

A 25-year-old woman presented to a dermatologist for a skin check. Routine examination of the oral cavity revealed bilateral bony growths along the buccal aspect of the mandible and maxilla as well as the mandibular arch. The growths were covered with normal mucosa and were nontender. No erythema or discharge was present. The patient reported that the bony growths had been present for as long as she could remember, had been stable, and had never caused any pain or discomfort.

Discussion. Patients commonly seek medical care for abnormalities of the oral cavity that cause discomfort. However, some abnormalities, such as torus mandibularis and buccal exostoses, rarely cause symptoms and might only be discovered by meticulous history-taking and thorough physical examination.

Torus mandibularis is a bony overgrowth located on the lingual aspect of the mandible (**Figure 1**), while buccal exostoses are multiple bony nodules along the buccal aspect of the maxilla or mandible (**Figures 2 and 3**).¹ Torus palatinus is another frequently observed bony overgrowth of the oral cavity, is located in the middle of the hard palate, and can be unilobular, polylobular, flat, or spindle-shaped.² Although torus mandibularis, torus palatinus, and buccal exostoses differ by location, they are histologically identical,¹ and the diagnosis is usually clinical. These conditions generally are asymptomatic but may cause discomfort in cases of extreme growth.² Furthermore, they may cause difficulty for those patients who require dentures.²





The etiology of torus mandibularis, torus palatinus, and buccal exostoses is unknown, but several theories have been proposed. Genetics appears to have a significant role in the development of these abnormalities but does not fully explain their presence.¹⁻⁴ Occlusal force,

such as with bruxism, also seems to predispose patients to the development of these growths.¹⁻ ⁶ Therefore, the development of tori and exostoses is likely multifactorial.^{1,2,4,6}

Studies report a wide variation in the prevalence of torus mandibularis, torus palatinus, and buccal exostoses but confirm that these lesions are common findings on oral examination.^{1,7-9} Torus palatinus is the most common of these findings,^{8,9} and tori and buccal exostoses frequently occur together.¹

Treatment of tori and buccal exostoses is usually not necessary. Patients should be reassured that these growths are benign and should be encouraged to maintain good oral hygiene. However, patients may require surgical removal if the growths cause pain due to ulcerations, difficulty eating or speaking, or difficulty wearing dentures.¹⁰

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