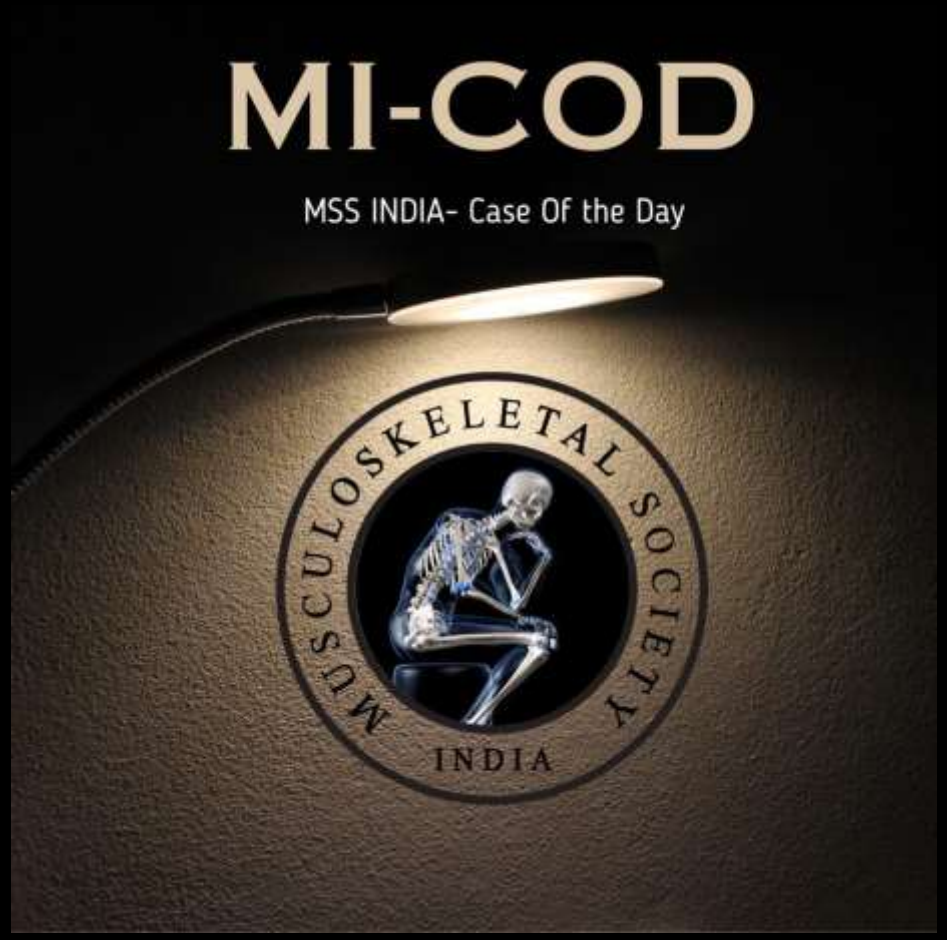
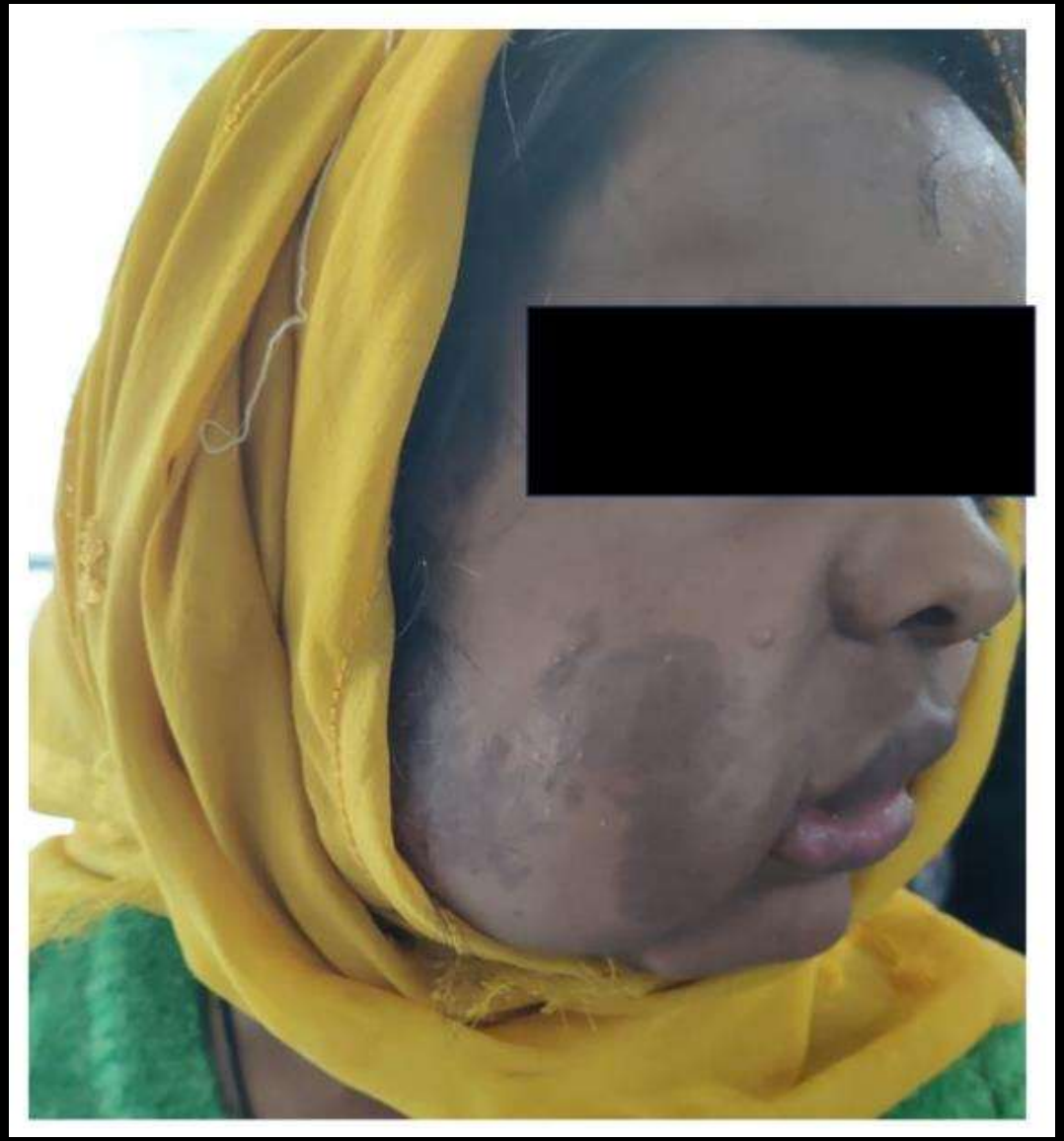
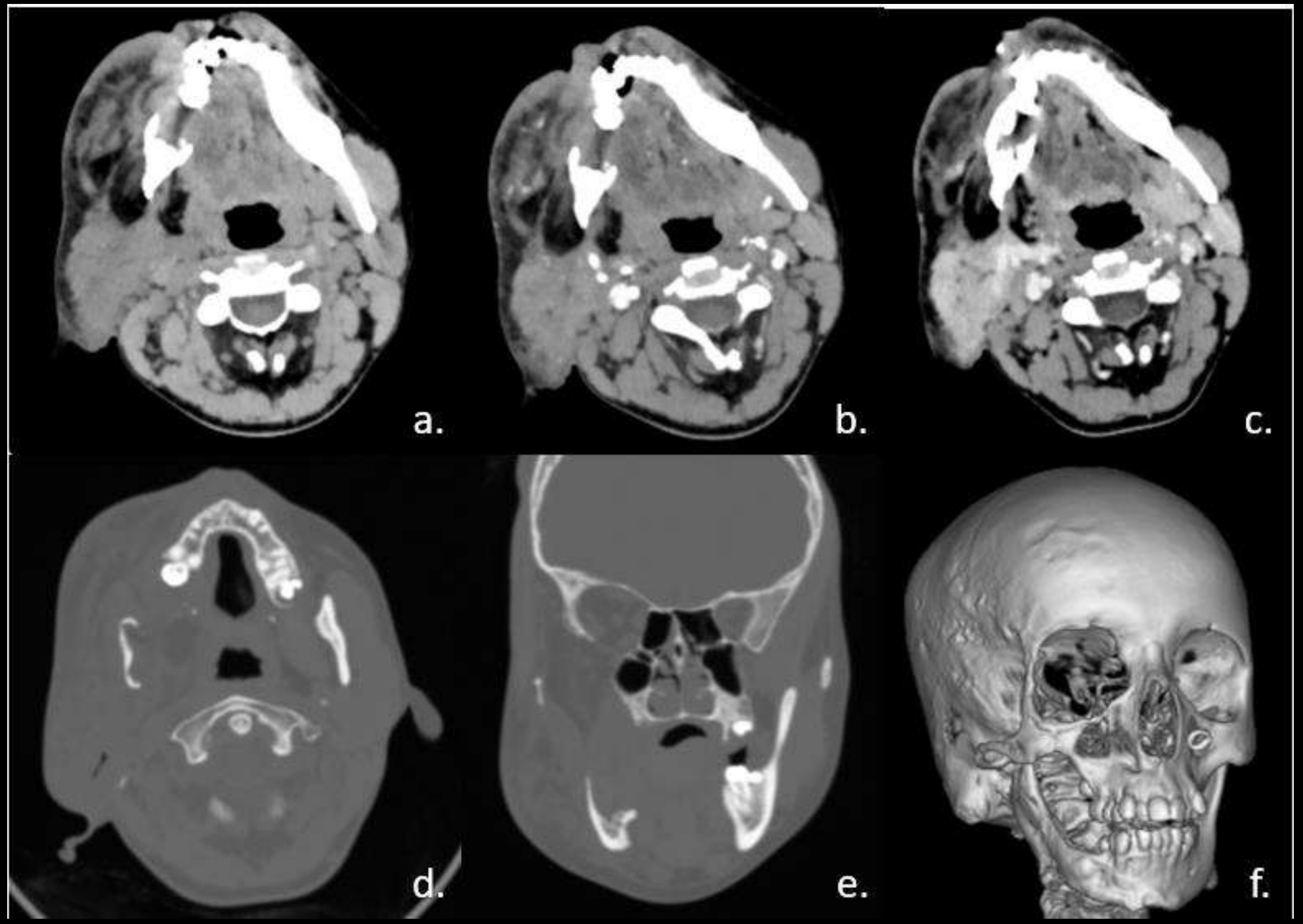
MICOD - 13/05/24
Case contributor – Dr. Sonal Saran



A 17-year-old female patient presented with a chief complaint of swelling of the right side of the face/cheek since birth, which was gradually increasing in size. Other complaints included pain and loosening of teeth. There was no associated fever, trauma, swelling, sinus opening, or pus discharge.



Computed tomography of face; a. non-contrast axial; b. arterial phase axial; c.
venous phase axial; d. bone window axial; e. bone window coronal; and, f. Threedimensional reconstruction produced with Volume Rendering.



- A craniofacial computed tomography (CT) scan was conducted, unveiling soft tissue thickening in the subcutaneous tissue of the right half of the face, hypertrophy of the parotid gland, and osteolytic processes affecting the right hemimandible, maxillary alveolus, zygoma, greater wing of the sphenoid, and pterygoid body and plates.
- No periosteal reaction or reactive new bone formation was evident around the remaining bone tissues.

Gorham- Stout syndrome

- Gorham-Stout syndrome, also known by various synonymous names such as Gorham’s disease, vanishing bone disease, phantom bone disease, disappearing bone disease, progressive osteolysis, idiopathic massive osteolysis, hemangiomatosis, and lymphangiomatosis, is a rare condition characterized by the proliferation of thin-walled vascular channels leading to the destruction and resorption of the osseous matrix.
- The syndrome can affect any bone in the human skeleton, with the mandible being the most frequently impacted in the maxillofacial area.