A "Leave Me Alone" Jaw Lesion

Galal Omami

University of Kentucky, galal.omami@uky.edu

Follow this and additional works at: https://uknowledge.uky.edu/ohp_facpub

Part of the Dentistry Commons

Right click to open a feedback form in a new tab to let us know how this document benefits you.

Repository Citation

Omami, Galal, "A "Leave Me Alone" Jaw Lesion" (2020). Oral Health Practice Faculty Publications. 16.
https://uknowledge.uky.edu/ohp_facpub/16

This Article is brought to you for free and open access by the Oral Health Practice at UKnowledge. It has been accepted for inclusion in Oral Health Practice Faculty Publications by an authorized administrator of UKnowledge. For more information, please contact UKnowledge@lsv.uky.edu.
A "Leave Me Alone" Jaw Lesion

Digital Object Identifier (DOI)
https://doi.org/10.1177/0145561320933960

Notes/Citation Information
Published in *Ear, Nose & Throat Journal*.

© The Author(s) 2020

This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 License (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (https://us.sagepub.com/en-us/nam/open-access-at-sage).

This article is available at UKnowledge: https://uknowledge.uky.edu/ohp_facpub/16
A “Leave Me Alone” Jaw Lesion

Galal Omami, BDS, MSc, MDentSc1

Stafne bone cavity is a focal defect of the cortical bone that may develop on the lingual surface of the mandible to accommodate a portion of the submandibular salivary gland. Commonly used terms include Stafne bone defect, lingual salivary gland depression, lingual mandibular bone depression, and static bone cavity. The lesion occurs mainly in the third molar angle region between the mandibular canal and the inferior cortex of the mandible and may encroach on either of these structures. It is usually unilateral, but bilateral lesions have been reported.1 Rare examples have been reported in the mandibular premolar canine and upper ramus regions associated with the sublingual and parotid glands respectively.2 3 The incidence of Stafne bone cavity is between 0.1% and 0.48%, with most cases developing in middle-aged and older men.4 The lesion is asymptomatic and discovered on routine radiographs. Although most lesions contain salivary gland tissue, a minority appear to contain fat, lymphatic tissue, or muscle.5

On imaging, a Stafne defect appears as an ovoid or round radiolucent area in the posterior mandibular body below the mandibular canal (Figure 1). The periphery is well defined by a thick and dense sclerotic border. Although the diagnosis of Stafne bone cavity can usually be determined on plain films, additional imaging with computed tomography or magnetic resonance imaging is needed in atypical cases.6 The lesion is innocuous, and no treatment is required.

Declaration of Conflicting Interests
The author(s) declared no potential conflicts of interest with respect to the research, authorship, and/or publication of this article.

Funding
The author(s) received no financial support for the research, authorship, and/or publication of this article.

ORCID iD
Galal Omami  https://orcid.org/0000-0003-1187-1816

References

1 Division of Oral Medicine, Diagnosis and Radiology, Department of Oral Health Practice, University of Kentucky College of Dentistry, Lexington, KY, USA

Received: May 8, 2020; accepted: May 21, 2020

Corresponding Author:
Galal Omami, BDS, MSc, MDentSc, FRCD(C), Division of Oral Medicine, Diagnosis and Radiology, Department of Oral Health Practice, University of Kentucky College of Dentistry, 800 Rose Street, Room MN-320, Lexington, KY 40536, USA.
Email: galal.omami@uky.edu

Creative Commons Non Commercial CC BY-NC: This article is distributed under the terms of the Creative Commons Attribution-NonCommercial 4.0 License (https://creativecommons.org/licenses/by-nc/4.0/) which permits non-commercial use, reproduction and distribution of the work without further permission provided the original work is attributed as specified on the SAGE and Open Access pages (https://us.sagepub.com/en-us/nam/open-access-at-sage).

