

## Clinical Image

# A Clinical Image of Enamel Hypoplasia-Turners Tooth

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## Clinical Image

A 11 year old female patient comes to the department of oral medicine and radiology with a chief complain of broken teeth in upper front teeth region since its eruption (Figure 1). Past medical history was non-contributory. Patient gave a history of decayed deciduous incisors which was removed due to dental caries. Patient gave no contributory history regarding any deliterious habits. On intraoral examination of the teeth showed brown discoloration in the right maxillary central incisors. Yellowish discoloration seen on the left maxillary central incisors. Tooth was non tender on palpation and percussion. In both the incisor teeth enamel discoloration, abnormal coalescence, with some parts of the enamel was missing. Correlating the past dental history of the patient and its effect on the enamel of the permanent teeth, a final diagnosis of Type IV enamel hypoplasia/ Turners tooth was given.

## Introduction

Hypoplasia is a developmental disturbance of the teeth which can be a outcome of a trauma or an infection before its eruption in the oral cavity. It is usually characterized by the disruption in the enamel matrix formation. Turners hypoplasia if found in the anterior area of the mouth, the most likely cause is trauma to the tooth bud [1]. The characteristics of clinical enamel hypoplasia include unfavorable esthetics, higher dentin sensitivity, malocclusion and dental caries susceptibility [2].



## Reasoning

Enamel hypoplasia is a developmental anomaly; it was classified by Silberman, et al. [3].

**Type I hypoplasia:** Enamel discoloration due to hypoplasia.

**Type II hypoplasia:** Abnormal coalescence due to hypoplasia.

**Type III hypoplasia:** Some parts of enamel missing due to hypoplasia.

**Type IV hypoplasia:** A combination of previous three types.

Correlation of the history given by the patient plays a major role in giving a final diagnosis, like our reported case. Probability of infection in deciduous teeth could be a cause for this development disturbance .

## References

1. Broadbent JM, Thomson WM, Williams SM. Does caries in primary teeth predict enamel defects in permanent teeth? A longitudinal study. *J Dent Res.* 2005; 84: 260-264.
2. Kalra N. Sequealae of neglected pulpal infections of deciduous molars. *Endodontology.* 1994; 6: 19-23.
3. Golpaygani VM, Mehrdad K, Mehrdad A, Ansari G. An evaluation of the rate of dental caries among hypoplastic and normal teeth : A case control study. *Res J Biol Sci.* 2009; 4: 537-541.