Preface: Current Concepts in the Management of Pathologic Conditions
John H. Campbell

Pathology Associated with the Third Molar
John H. Campbell

Several studies have reported the prevalence of pathology associated with retained third molar teeth. Although most oral surgeons have encountered many patients with infection and lytic lesions associated with retained third molars, assessment of the frequency of abnormality around these teeth has previously been hampered by the lack of well-designed studies to investigate a subject so important to oral and maxillofacial surgeons. This article reviews what is known—and what isn’t known—about pathologic conditions associated with both symptomatic and asymptomatic third molar teeth.

Emerging Concepts in the Management and Treatment of Osteonecrosis of the Jaw
Salvatore L. Ruggiero

Since the first description of bone necrosis in patients receiving bisphosphonate therapy in 2004, there have been multiple retrospective, prospective, and case-control studies that have served to characterize the diagnosis, associated risk factors, and treatment of this new complication. Bisphosphonate-related osteonecrosis of the jaw is at present associated with several risk factors that are identified across several disciplines in medicine and dentistry. With this level of broad-based recognition, new clinical and basic science research initiatives have begun and are likely to elucidate the etiopathogenesis of this disease process, significantly improving the level of disease management and prevention.

The Keratocystic Odontogenic Tumor
M.A. Pogrel

In 2005, the World Health Organization renamed the lesion previously known as an odontogenic keratocyst as the keratocystic odontogenic tumor. The clinical features associated with the keratocystic odontogenic tumor show it to be a unicocular or multilocular radiolucency, occurring most frequently in the posterior mandible. These tumors are normally diagnosed histologically from a sample of the lining. With simple enucleation, it seems that the recurrence rate may be from 25% to 60%.

The Diagnosis and Management of Parotid Disease
Eric R. Carlson and David E. Webb

A specific and regimented approach to the diagnosis and management of patients with disease of the parotid gland is necessary for correct diagnosis and management. Patient morbidity or mortality may result if there is a delay in the diagnosis of a malignant parotid tumor. This article reviews the diagnosis and management of parotid disease, with a particular concentration on neoplastic processes. An overview of the superficial parotid mass is emphasized because most neoplastic processes occupy the superficial lobe of the parotid gland.
Oropharyngeal cancer was traditionally treated with en bloc resection of the tumor via lip-split mandibulotomy approach, often with adjuvant radiation and chemotherapy. In the 1990s, organ-sparing definitive chemoradiation therapy without surgery became the standard of care for oropharyngeal squamous cell carcinoma. Although organ-sparing treatment provided acceptable locoregional disease control with preservation of anatomic organs adjacent to the tumors and less disfiguration from lack of surgical incisions, it often resulted in significant deficits in speech and swallowing. This article reviews a current organ-and-function preserving approach to oropharyngeal carcinoma using the surgical robot.
medical oncologists. In recent years, great scientific progress has been made in targeted therapies. Although many modalities remain in preclinical validation, some advances affect patient care today. This article summarizes the concepts of targeting and explores current examples of successful targeting and emerging targeting technologies in head and neck oncology.

Oral Lichen Planus 93
Justin Au, Dhaval Patel, and John H. Campbell

Oral lichen planus is a common immunologically mediated mucocutaneous disease. These lesions have varied clinical presentations and symptoms, which include reticular, erosive, or erythematous forms. This article reviews the diagnosis and management of oral lichen planus.

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