# BIOPSY AND HEALING OF THE BIOPSY WOUND

Department of Oral Pathology & Microbiology

## **Purpose Statement**

At the end of the lecture the student should be able to-

- Define the biopsy.
- Enlist Types of biopsy
- Portray Indications & Contra-indications

## Contents

- Introduction
- Contraindication
- Methods of biopsy
- Incisional and Excisional biopsy
- Exfoliative cytology
- Punch biopsy

GREEK

#### **BIO-** LIVING, LIFE **OPSIS-** TO VIEW

 It is the removal of tissue from the living organism for the purpose of microscopic examination and diagnosis.

#### TYPES OF BIOPSY -

- Excisional Biopsy Total excision of a small lesion for microscopic study
- Incisional Biopsy a small section of a large lesion removed for microscopic study

### **Contraindications**

- There are no absolute contraindications for biopsy.
- The relative contraindication for biopsy are
  - Pigmented lesions
  - Vascular lesions
  - Uncontrolled diabetes
  - Lesions prone for infections

## **Methods of Biopsy**

- Surgical excision by scalpel
- 2. Surgical removal by cautery or a high frequency cutting knife
- 3. Removal by biopsy forceps or biopsy punch
- 4. Aspiration through a needle with a large lumen
- Exfoliative cytology

## Incisional Biopsy



 Biopsy that samples only a particular portion or representative part of a lesion.

• If a lesion is large or has different characteristics in various locations more than one area may need to be sampled.

### **Indications:**

 Indicated in larger lesions for diagnosis (i.e. larger than 1 cm in diameter).

Lesions in hazardous location.

 Indicated for tumors of the soft tissues to distinguish benign conditions from malignant.



Erythroplakia



Nodular Leukoplakia



Squamous cell carcinoma







 Total excision of a small lesion for microscopic study is called excisional biopsy.

 It is preferred if the size of the lesion is small enough (< I cm), such that it may be removed along with the margins of normal tissue and wound can be closed primarily.

### **Indications:**

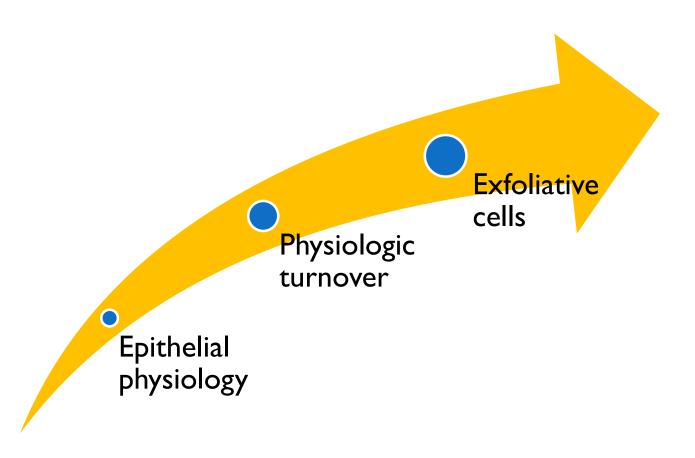
- Lesions smaller than I cm.
- If excision does not risk any vital structure.
- If clinical impression is that of benign lesion.
- If excision can be curative.





## **Exfoliative cytology**

 It is the study of cells which exfoliate from the body surfaces



## Methodology

- Surface of the lesion is wiped with sponge material which is then sectioned, or scraped.
- Scrape the surface of lesion vigorously with moistened tongue blade or cytobrush, smeared on a microscopic slide and fixed with 90% alcohol.

- It is studied by the cytopathologist for presence of atypical or diagnostic cells
- The cytopathologist may classify the smear into following classes

- Class I Normal normal cells are present
- Class II Atypical minor atypia but no evidence of malignant changes
- Class III intermediate- wider atypia that suggest cancer, but is not clear cut and represent precancerous lesions- ca in situ- Biopsy is recommended

- Class IV suggestive of cancer- few cells with malignant characteristics or with many cells with borderline characteristics- Biopsy is mandatory
- Class V positive of cancer cells are obviously malignant- Biopsy is mandatory





- Removal of a small disk-shaped sample of tissue.
- Used in difficult to access areas like retromolar trigone, maxillary tuberosity.
- Indicated in patients with trismus.







## Summary

- Definition of biopsy, the indications and contraindications of biopsy.
- Exfoliative cytology, Punch biopsy.

### **BIBLIOGRAPHY**

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# THANK YOU