

Role of Molecular Diagnostics in Oral and Maxillofacial Pathology

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Received June 16, 2025; Revised June 23, 2025; Accepted June 26, 2025

ABSTRACT

Oral and maxillofacial pathology encompasses numerous diseases of the mouth and face. Even though conventional methods of diagnosis such as imaging and histopathology are still effective and widely used, they are not always beneficial for early diagnosis. Molecular diagnostics has revolutionized the field by aiding in identifying genetic and molecular alterations in multifactorial diseases with precision. This review delineates the use of molecular diagnostics in oral and maxillofacial pathology, its applications, advantages, and future directions. Key molecular technologies such as polymerase chain reaction (PCR), next-generation sequencing (NGS), fluorescence in situ hybridization (FISH), and liquid biopsy aid in early diagnosis, prognosis, and monitoring of multifactorial diseases such as oral squamous cell carcinoma (OSCC) and human papillomavirus-related cancers. Molecular diagnostics has several advantages such as high sensitivity and specificity, non-invasive sampling, and potential for personalized medicine by targeted therapy. Despite such advantages, disadvantages such as high cost, technical expertise, and need for standardization restrict extensive use. Future developments such as the identification of new biomarkers, use of artificial intelligence (AI), and the development of point-of-care molecular diagnostic tools could further enhance diagnostic accuracy and accessibility. Molecular diagnostics can prove to be an effective tool in oral and maxillofacial pathology, having a significant role in patient management and clinical decision-making.

INTRODUCTION

Oral and maxillofacial pathology encompasses a wide variety of disorders of the oral cavity, jaws, and related anatomical structures. This variety includes infections, inflammatory diseases, benign and malignant neoplasms, developmental anomalies, and autoimmune disorders [1]. Early and correct diagnosis of these disorders is paramount to the success of treatment and to patient prognosis. Conventional techniques, including histopathological examination and radiographic imaging, are still standard techniques of disease detection. Although these methods are useful for morphological and structural information, they are frequently unable to yield enough information for the early detection of disease or the identification of lesions with indistinguishable histological characteristics. The advent of molecular diagnostics has transformed the field of oral pathology by enabling the detection of genetic, epigenetic, and molecular alterations that form different pathological phenomena. This technology enhances the diagnostic accuracy, personalizes treatment protocols, and enables prognostic evaluation. Molecular techniques such as polymerase chain reaction (PCR), next-generation sequencing (NGS), fluorescence in situ hybridization (FISH), and liquid biopsy enable early diagnosis of neoplasms, detection of viral pathogens, and assessment of genetic aberrations that occur during tumorigenesis [2]. By

adopting molecular diagnostics as a part of routine clinical practice, pathologists and clinicians can increase the specificity of disease management. This article provides an exhaustive review of the applications, benefits, limitations, and future of molecular diagnostics in oral and maxillofacial pathology.

APPLICATIONS OF MOLECULAR DIAGNOSTICS IN ORAL AND MAXILLOFACIAL PATHOLOGY

One of the keys uses of molecular diagnostics in oral and maxillofacial pathology is the detection of oral cancer at an early stage. Oral squamous cell carcinoma (OSCC) is the most common cancer in the region and is associated with high morbidity and mortality [3]. Early diagnosis is needed to improve the survival rate of the patient. Molecular diagnostic techniques, such as the detection of salivary biomarkers such as microRNAs and transferrin, allow for non-invasive

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Citation: Chaudhry S & Ehtesham Z. (2025) Role of Molecular Diagnostics in Oral and Maxillofacial Pathology. J Oral Health Dent, 8(1): 625-628.

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screening and early detection of the disease. These biomarkers are valuable markers for early detection of OSCC, which can be possible before the onset of clinical symptoms.

Genetic mutations form the etiology of the majority of oral conditions. TP53 gene mutations, for instance, are frequently implicated in OSCC, while mutations in other genes, such as EGFR and PIK3CA, are implicated in tumor progression. Sophisticated molecular techniques like PCR and NGS enable the detection of mutations, with improved diagnostic specificity and prognostication [4]. Equipped with the molecular profile of a lesion, pathologists can provide patient-specific treatment recommendations that are genetically informed.

Molecular diagnosis is an important tool in the diagnosis of viral infections leading to oral disease. Human papillomavirus (HPV) is implicated in some oropharyngeal cancers and among them, HPV-16 and HPV-18 are prominent. HPV DNA detection in tissue samples by molecular techniques such as real-time PCR is helpful in early diagnosis and helps in the estimation of risk. These findings are helpful in the estimation of prognosis and the selection of appropriate therapy [5]. In addition to diagnostic screening, molecular diagnostics also has the role of monitoring response to treatment. Patients undergoing chemotherapy or targeted therapy for oral cancer must be monitored regularly to check the efficacy of treatment. Liquid biopsy, in which circulating tumor DNA (ctDNA) in the blood is examined, enables real-time monitoring of minimal residual disease (MRD). The process helps in the early identification of relapse of the tumor and enables re-evaluation of treatment protocols, as and when needed.

MOLECULAR DIAGNOSTIC TECHNIQUES USED IN ORAL AND MAXILLOFACIAL PATHOLOGY

Various molecular diagnostic techniques are utilized to detect genetic mutations, epigenetic alterations, and microbial infections in oral disorders. Some of the most commonly employed techniques are:

1. Polymerase Chain Reaction (PCR)

PCR is a routine molecular diagnostic method that amplifies a specific DNA or RNA sequence to detect genetic mutations, infections, and epigenetic alterations. It is particularly useful in detecting HPV DNA within oropharyngeal cancers and detecting tumor suppressor gene mutations such as TP53 [6]. There are various types of PCR including:

Real-time PCR (qPCR): Allows for quantitative detection of nucleic acids, enabling accurate measurement of biomarker expression levels.

Reverse Transcription PCR (RT-PCR): Used for detecting RNA-based markers, including viral RNA and miRNAs.

2. Next-Generation Sequencing (NGS)

NGS is a next-generation genomic sequencing technology that enables the examination of multiple genes as a whole. It is particularly crucial in OSCC genetic mutation detection, tumor heterogeneity profiling, and precision medicine guidance. Whole-exome sequencing and targeted gene panels are common in oral cancer diagnosis.

3. Fluorescence in Situ Hybridization (FISH)

FISH is a cytogenetic test to identify chromosomal changes and gene amplifications in cancer cells. FISH has been applied in the detection of gene rearrangements in salivary gland carcinomas, for example, ETV6-NTRK3 fusion in secretory carcinoma. FISH is applied to detect sites of HPV integration in oropharyngeal cancers.

4. Microarray Analysis

Microarray technology facilitates the simultaneous study of thousands of gene expressions and is thus well-suited to the identification of gene expression signatures of oral diseases. Microarray has been utilized in OSCC research to discriminate between aggressive and non-aggressive tumor subtypes based on patterns of gene expression.

5. Mass Spectrometry and Proteomics

Mass spectrometry-proteomic analysis enables the identification of OSCC-specific protein biomarkers in oral fluids such as saliva and serum. The technique is particularly efficient in the identification of salivary biomarkers for OSCC, including interleukins, cytokines, and matrix metalloproteinases.

6. DNA Methylation and Epigenetic Analysis

Epigenetic modification, such as DNA methylation and histone modification, is significant in carcinogenesis. MSP and bisulfite sequencing provide how hypermethylation of the tumor suppressor genes, for example, p16INK4a, and its silencing in OSCC can be ascertained.

ADVANTAGES OF MOLECULAR DIAGNOSTICS

Molecular diagnosis is quite advanced compared to classical diagnostic tests. The most compelling benefit is that it can carry out non-invasive sampling. Analysis of saliva is one of the promising molecular diagnosis technologies that is painless, convenient, and capable of disease detection. Saliva contains variant biomarkers showing systemic and dental diseases, and as such can act as an acceptable alternative for invasive biopsy. Furthermore, advantages of molecular diagnostics are that it is highly sensitive and specific [7]. The conventional histopathological techniques are based on morphologic evaluation, and thus sometimes yield subjective results. Molecular assays, however, can detect very subtle genetic alterations and reduce the rate of false-negative or false-positive findings. This enhances the diagnostic yield and allows improved management of the

patient. Moreover, molecular diagnostics allows for customized therapy. Traditional treatment methods also follow the one-size-fits-all approach, which may not be effective for all patients. Molecular diagnostics, using the identification of particular genetic mutations and molecular alterations, allows site-specific therapies to be developed [8]. For example, patients harboring EGFR mutations are treated with tyrosine kinase inhibitors (TKIs) and patients with PIK3CA mutations are treated with targeted molecular inhibitors. This approach minimizes side effects and maximizes drug effectiveness.

CHALLENGES AND LIMITATIONS

Despite its numerous advantages, molecular diagnostics has various challenges. Cost and availability are one of the fundamental barriers. Complex molecular tests, such as whole-genome sequencing, are expensive and may not be available in every health facility. This is particularly a challenge in resource-limited regions where access to advanced diagnostic technologies is restricted. Technical know-how is also a barrier. Molecular test interpretation and performance require specialized training and education. Compared to conventional histopathology, which is performed more extensively, molecular diagnostics necessitates advanced data analysis and bioinformatics and therefore restricts access to general pathologists. Continuous training programs are necessary to bridge the knowledge gap and facilitate molecular diagnostics as routine clinical practice. In addition, standardization of molecular test protocols remains a significant challenge. Different laboratories use different methods and platforms, and this may introduce variability in results. Standardized protocols for molecular testing and interpretation are essential to be able to provide reliability and reproducibility across different healthcare institutions.

FUTURE PROSPECTS

The future of molecular diagnostics in oral and maxillofacial pathology is promising, with research still focusing on enhancing diagnostic potential. One of the predominant areas of development is biomarker discovery. Discovery of new biomarkers for many oral disorders will continue to improve early detection, prognosis, and targeted treatment. Researchers are also actively pursuing new molecular markers for oral leukoplakia and precancerous lesions, that may find application in risk stratification and prevention. Technological developments are also facilitating the development of molecular diagnostics. Point-of-care molecular diagnostic devices will become feasible, enabling rapid and inexpensive disease detection. Portable devices utilizing technologies like isothermal amplification and CRISPR diagnostics are being explored to bring molecular testing to the field. The application of artificial intelligence (AI) and machine learning in conjunction with molecular diagnostics is yet another exciting prospect. AI-powered algorithms can analyze large volumes of molecular data,

identify patterns, and produce predictive data for the diagnosis and management of diseases. This intersection of molecular pathology and AI has the potential to significantly enhance diagnostic efficacy and accuracy.

CONCLUSION

Molecular diagnostics has transformed oral and maxillofacial pathology practice by offering precise, non-surgical, and customized approaches to the detection and treatment of diseases. Ranging from the identification of incipient cancer to the examination of genetic mutations, from post-treatment monitoring to precision therapy, molecular techniques have improved patient care dramatically. Even so, challenges in the guise of cost, accessibility, and standardization must be addressed to make these advanced diagnostic techniques universally accepted. With continuous innovation in technology and research, molecular diagnostics is poised to have a progressively integral role in the future of oral and maxillofacial pathology, resulting in better patient outcomes and higher healthcare practice.

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