

Giant Pleomorphic Adenoma of Right Parotid Gland- A Case Report

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ABSTRACT

Pleomorphic adenomas are the most common salivary gland tumors; most of them are essentially benign, occurring in the Parotid salivary gland, predominantly involving its superficial lobe. They are described as pleomorphic in view of their diverse histological appearance with varying amount of epithelial and connective tissue elements. They are usually very slow growing and rarely produce symptoms that is the reason why most patients seldom seek medical attention till they attain significantly large size. Here, we present a rare case of Giant Pleomorphic adenoma of the right Parotid gland, which is successfully operated without damaging the Facial Nerve and its branches. We present this case in view of rarity of presentation and its enormous size.

Keywords: Benign salivary neoplasam, parotid gland, giant pleomorphic adenoma

INTRODUCTION

Pleomorphic Adenoma (PA) is the most common salivary gland tumour, accounting for about 60 - 80% of all the benign tumours of the salivary glands and for 60% to 70% of all the Parotid tumours. Right sided involvement is more common than the left side and it is more common in females than males (2:1).^[1,2] Commonly involved in age group is 40-60 years. PA usually presents clinically as a painless, slow-growing mass, varying from 2-6 cm when resected.^[3] Cases of Giant PA have been reported in the literature mostly arising from parotid gland presenting as large, irregular multi nodular mass, the largest one reported so far weighing as massive as 27 Kgs.^[6]

CASE REPORT

A 58 year old female patient admitted to the Department of General Surgery, CAIMS Hospital at Karimnagar in July, 2017. She complained of a swelling on the right side of the neck since 12 years, gradually progressing to attain

the present size (Figure-1). There was no history of mouth deviation, decreased salivation, dry eyes, and pain or increase in size during mastication.

Clinical Examination showed a giant, firm, large lobulated swelling in right side neck about 15 x10x6 cms in size, extending up to 2 cms below ear lobule superiorly and laterally up to anterior border of right sternocleidomastoid muscle. There were no signs of facial nerve involvement.

Routine preoperative blood and other investigations were within normal limits. Pre-operative FNAC examination was reported as benign salivary neoplasm most likely pleomorphic adenoma of parotid gland. Ultrasound scan neck showed a 20 x10 cm sized hypoechoic lesion with few cystic spaces noted arising from right parotid gland. Computed tomography (CT) & MRI showed a well defined pleomorphic adenoma of the right parotid gland with preservation of tissue planes with adjacent vital structures. Under General anaesthesia, Superficial Parotidectomy with excision of redundant skin

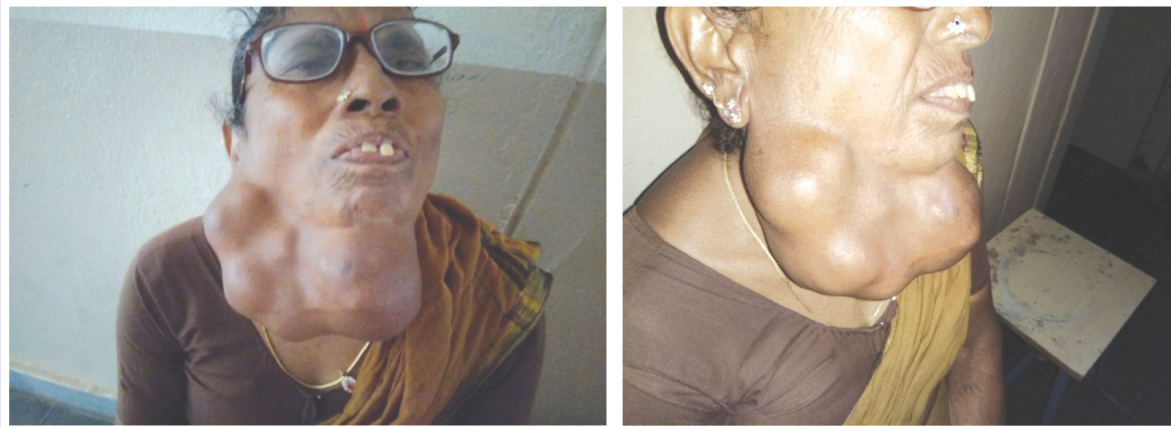


Figure 1 & 2: Preoperative picture showing with Giant pleomorphic adenoma of the right parotid gland.

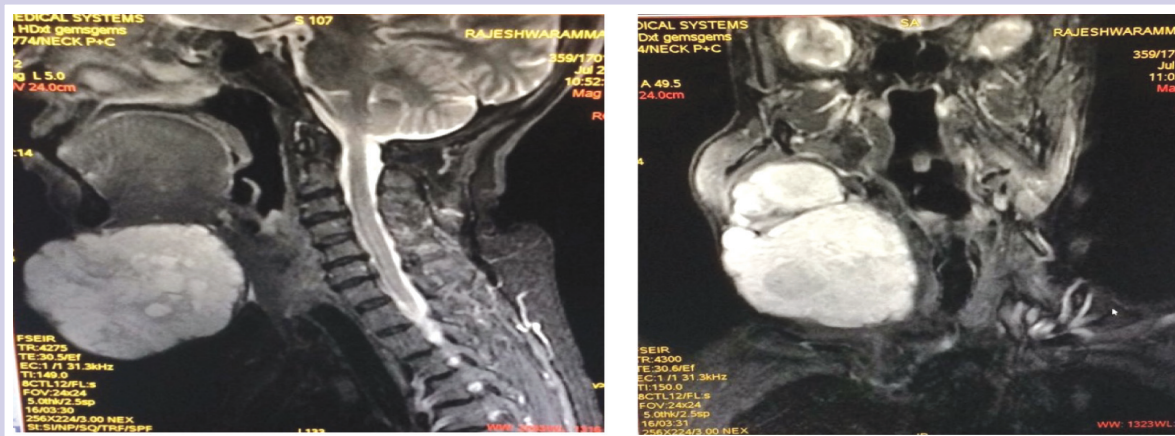


Figure 3 & 4 : MRI Neck showing well defined parotid tumor with cystic spaces



Figure 5 : Gross specimen cut sections showing multiloculated grey brown soft tissue mass measuring about 20 x11x6 cms.

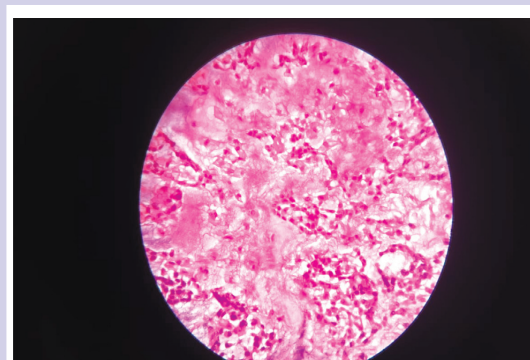


Figure 6 : Sections show salivary gland tissue with fibroadipose tissue with mucoïd and hyaline material along with chondromyxoid areas with focal squamous metaplasia.



Figure 7 : Specimen picture (intra-operative)



Figure 8 : Patient follow-up at 2 weeks

preserving facial nerve and all its branches was done (Figure 3). Perioperative and post operative period was uneventful and patient was discharged on 10th day. Macroscopically, the removed specimen measured 20x11 x 6 cm, weighing around 1.6 Kgs (Figure: 5). Post operative outcome was excellent, without signs of facial nerve palsy, damage or recurrence (Figure 6). Histopathological examination report of the specimen was consistent with benign pleomorphic adenoma of parotid gland; there was no evidence of malignancy in the section examined. 5/5 lymph nodes of cervical region removed along with main specimen showed non-specific reactive follicular hyperplasia.

DISCUSSION

Approximately 80% of parotid masses are benign; of these 80% of are pleomorphic adenomas (PA). These tumors are almost uniformly characterized by a slow growing, painless mass in the preauricular or retromandibular area with no associated facial weakness.^[5]

In 1989, Schultz Coulon reviewed 31 cases of giant PA's of the parotid gland.^[6] He found a female predominance (64.5%) and weight of tumor between 1-27 Kg. The case reported by Spence in 1863 is the first mention of successful resection of a mixed tumor larger than 1 kg.^[7] Buenting et al found a mean tumor weight of 7.81 Kg, nine out of 10 cases occurred in female, with mean age of 56.2 years.^[8]

The surgical removal of these tumors is the most challenging task for a Head & Neck or a General Surgeon, because of the location of the tumor with very critical nearby structures such as large vessels of the neck, sympathetic chain, lymph nodes, and lower cranial nerves especially the relation to the facial nerve.

We at the department of General surgery successfully managed this rare case of giant pleomorphic adenoma of right parotid gland by doing Superficial Parotidectomy under general anaesthesia without damaging any vital structures of the neck including the facial nerve and its branches.

CONFLICT OF INTEREST :

The authors declared no conflict of interest.

FUNDING : None

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