



Epidermoid Cysts of Spleen - A Rare Site. 2 Case Reports And Review Of Literature

KEYWORDS

Epithelial cyst, epidermoid, congenital, splenectomy

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Introduction

Cysts are common in the internal organs of abdomen. Most of them are congenital, some are due to trauma and some due to infection. The splenic cysts are easily diagnosed with imaging modalities.

Case report 1

A 44 year male presented with dull aching pain in the left hypochondrium for 1 year. No history of trauma. Clinical examination revealed large splenomegaly crossing the mid-line. CT scan abdomen showed large cyst. Other laboratory tests were normal. Gastroscopy was normal. Splenectomy was done and specimen sent for histopathological examination. It was a case of Epidermoid cyst of spleen.

Case report 2

A 32 year male presented in the out patient department of GE with complaints of mass in the left upper abdomen. On examination, spleen was enlarged 8 cm below the left costal margin. His haemogram was normal. CT scan abdomen showed large splenic cyst. Patient was referred to surgical department for opinion. Splenectomy was done and specimen showed large epidermoid cyst.

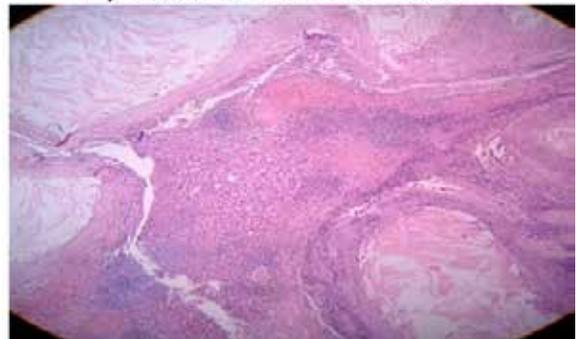
Discussion.

Splenic cysts not very common, but they are the most common focal lesions. Splenic cysts are far more common than solid lesions. They may be congenital or acquired. The incidence is about 8 per 10,000. Splenic cysts do not usually produce symptoms. Large cysts may cause pain and heaviness in the left upper quadrant, due to distension of the capsule or space occupying mechanisms within the abdominal cavity, or they may present as a palpable mass and sometimes symptoms reflect the aetiology of spleen enlargement. Occasionally splenic cysts may present with complications, such as infection, rupture and hemorrhage². Diagnosis is usually made by clinical examination and confirmed by imaging modalities like Ultra sound, CT scan, MRI. The histogenesis of epidermoid cyst³ is unknown. These cysts are accepted as sequestration cysts due to congenital or acquired causes. Congenital variety results from an aberrant embryogenic ectodermal implantation during embryogenesis. Acquired cysts are due to trauma or iatrogenic implantation of epidermis in favourable areas for growth. Epidermoid cysts express cytokeratin 1 and cytokeratin 10, which are constituents of suprabasilar areas of epidermis.



GROSS: received cystic mass of size 8 × 8 cms with compressed spleen to one side

Multiloculated epidermoid cyst of spleen-cyst filled with keratin material



Conclusion

Splenic cysts produce symptoms when they are big in size. Small cysts do not need surgical intervention. When

considering for splenectomy, every effort must be made to preserve as much spleen as possible.

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