



## HARD PALATE PLEOMORPHIC ADENOMA - CASE SERIES

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**ABSTRACT** Pleomorphic adenoma is a benign mixed tumor of salivary gland, which has both epithelial and mesenchymal elements. Most commonly arises in parotid or submandibular gland but rarely may arise from minor salivary glands present over lips and hard palate. Pleomorphic adenoma accounts for 40–70% of all salivary gland tumors, it is also the most common (70%) tumor of minor salivary gland.

**KEYWORDS :** Hard palate, benign mixed tumor, Minor salivary gland, pleomorphic adenoma.

### INTRODUCTION :

Salivary gland tumor from <3% of the head and neck tumor. Sixty percent of major by minor salivary gland tumor are pleomorphic adenoma. Pleomorphic adenoma is a benign mixed tumor. Pleomorphic adenoma of hard palate is a painless firm mucosal mass. Usually they lack a well defined capsule. Due to the distribution of minor salivary gland of the palate these. Tumors are located latterly and rarely cases the midline.

The aim of this paper is to describe cases of pleomorphic adenoma in the hard palate, all patient were treated with surgical excision and there was no recurrence one year post operation follow up.

### CASE DESCRIPTION

#### Case 1

40 year male patient presented to ENT OPD with complain of Painless lump in Hard palate. Since 5 months, History revealed a slow growing Mass, without pain, No history of trauma. Oral examination showed well defined 3x3x2cm mass intact overlying mucosa, Non mobile No Lymph nodes, general examination was Normal CT suggested benign Neoplastic lesion without bone Involvement Surgical excision was done and sample Sent for Histopathology, Report was Pleomorphic adenoma.

#### Case 2

52 years female presented to Surgery OPD with complain of mass in hard palate. History revealed, slow growing painless mass increasing in size over 8 months. No Lymphadenopathy. Systematic and general examination normal. Swelling was 4x3x4cm, intact overlying mucosa. FNAC revealed pleomorphic adenoma mass was excised and sent for histopathology. Histopathology report confirmed pleomorphic adenoma.

#### Case 3

22 year female came to ENT department with complain of Swelling on Rt lateral side of hard Palate. History revealed slow growing mass, painless mass. Since 2.5 months on examination it was well defined, intact overlying mucosa, No ulceration Size 3x2x2 cm FNAC report was Benign mixed tumor Surgical excision done and sent for histopathology Report Confirmed Pleomorphic adenoma.

FNAC finding- Smear was moderately Cellular. Showing mainly myoepithelial cells and plasmacytoid Cells with abundant well defined cytoplasm along with fibrillary chondromyxoid matrix.

Histopathology findings - Section showed ductal cells forming cysts and tubules, myoepithelial cells, plasmacytoid, & spindle cells scattered within Myxoid stroma.

### DISCUSSION

These tumors Contain both epithelial and mesenchymal tissue. Arrangement of epithelial elements may be in ducts, clumps, sheets, interlacing strands. Stroma can be cartilagenous, hyaline, mucoid, myxoid and surrounded by a fibrous Capsule

Pleomorphic adenoma of minor salivary gland tumor is more cellular in nature. Differential diagnosis of Pleomorphic adenoma of oral cavity includes palatal abscess mucoepidermal carcinoma, odontogenic cyst and non odontogenic cyst lymphoma soft tissue tumors such as

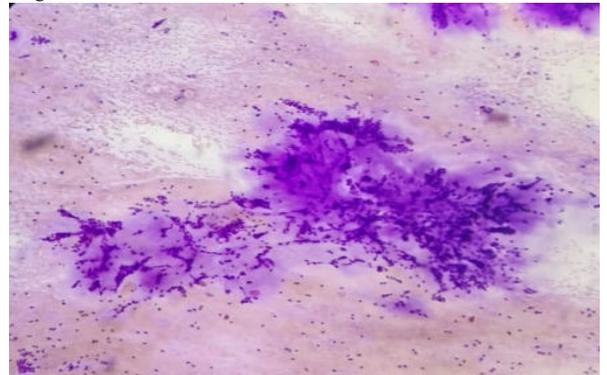
lipoma, fibroma, neurilemoma the hard Palate tumor is treated by wide local excision involving removal of tumor along with a surrounding Cuff of Normal tissue because the tumor lacks a proper capsule and Pseudopods may be present the recurrent tumors are often multinodular have No Capsule which is Why Surgical excision becomes difficult. The recurrence rate of pleomorphic adenoma is 6% noted by spiro in evaluation of 1342 patients.

The Malignant potential of pleomorphic adenoma is upto 6%. Prevalence rate of tumors in minor salivary glands is 20-40%. Most common age group affected is 4th to 6th decade with predominance in females. The Capsule in Pleomorphic adenoma may be incomplete and this is more common in minor Salivary gland. Diagnosis is based on history, Physical examination radiological investigation and histopathological examination. CT & MRI would help delineate soft tissue and bone spread simple enucleation should be avoided as it may lead to high recurrence rate.

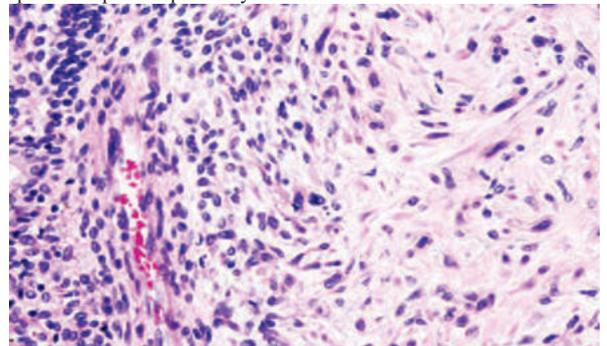
### CONCLUSION

Pleomorphic adenoma of hard palate is relatively rare tumor treatment is wide local excision as recurrence rate is low.

Since the majority of minor salivary tumors are malignant early diagnosis and Careful evaluation is advised.



FNAC smear showing chondromyxoid stroma alongwith scattered spindle shaped and plasmacytoid cells



H&E section showing chondromyxoid area epithelial cells myoepithelial cells

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