



GIANT LIPOMA – PRESENTING AS ANTERIOR NECK SWELLING

ENT

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ABSTRACT

Head and neck lipoma constitute 13 % of all mesenchymal benign tumors. 2 Anterior triangle lipoma is rare while posterior triangle lipoma is the most common. Giant lipomas >10cm are found in different parts of body but are rare in anterior part of neck. Surgery remains the treatment of choice. While giant lipoma may pose cosmetic disfigurement or may produce pressure symptoms. We here report such a case of giant lipoma present in anterior part of neck.

KEYWORDS

Giant lipoma, Anterior neck.

INTRODUCTION

Lipoma is a benign tumour of mature adipose tissue. It is a tumour which can occur anywhere in the body so called as the “ Universal tumour “. ¹ The lipoma constitute 13 % of tumour of head and neck. ² and are more common in posterior part of neck. Lipoma in anterior part of neck is rare and size more than 15 cm is even rare. ³

Case Report

A 55 years lady presented to the ENT department with a huge swelling in anterior part of neck since last 9 yrs and slowly increasing in size to attain the present size. She has no other complains apart of cough on lying down position.

On examination a swelling measuring 20 x 10 cm was present in the anterior part extending from midline to right side upto the sternocleidomastoid on right side. The swelling was mobile, soft to firm and did not move on deglutation. Superiorly it extended from thyroid cartilage to the clavicle inferiorly. Fine needle aspiration cytology (FNAC) was advised. FNAC reported as suggestive of lipoma. (Figure 1). CT was suggestive of soft tissue swelling consistent with lipoma.

Surgical excision was planned for this patient under general anesthesia. The plane of the tumour was identified and was removed in toto using finger dissection and the “squeeze technique”. The wound was closed in layers and skin with subcuticular sutures. The histopathology was concordant with the diagnosis of lipoma. The patient is on regular follow up and no complains of recurrence.

DISCUSSION

Lipomas are tumour of mature adipose tumors of benign nature secondarily to proliferation of mature fat cells of hamatomatous in nature. ⁴ They may be classified as intermuscular , subfascial type and subcutaneous. ⁵ The cheek is the most common site in head and neck region followed by the tongue, floor of the mouth, buccal sulcus and less likely was gingiva. ⁶ The association of mutation of chromosome 12 is seen though exact cause is unknown. ⁷

These tumours are painless and presents with palpable masses which is generally ignored by the patient unless associated with pain or creates a cosmetic problem. ⁸ Giant lipomas may measure >10cm or may weigh 1 kg or more. ⁹ FNAC or CT may help in the correct diagnosis.

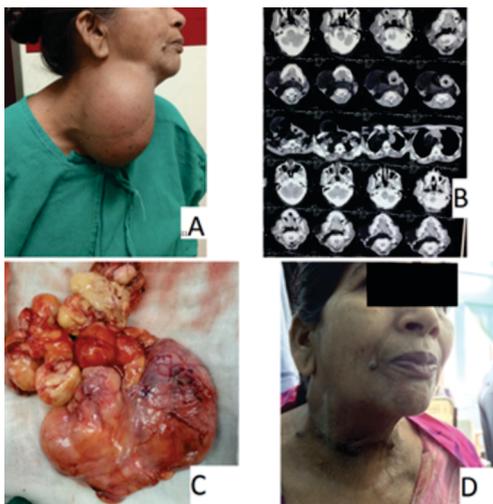
Surgical removal is suggested but requires through anatomical knowledge and meticulous skills as all vital tissue structures are present. To prevent recurrence complete excision with capsule is required.

CONCLUSION

Giant lipomas are rare in anterior part neck, as seen in our case report. Proper preoperative diagnosis including the clinical details, FNAC, imaging, surgical excision provides good outcome without functional impairment.

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A: Clinical picture
C: Post operative specimen

B: CT scan
D: Follow up picture.