



AN UNUSUAL CASE OF NECK LYMPHATIC MALFORMATION

Radio-Diagnosis

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ABSTRACT

Lymphatic malformations are benign lesions of vascular origin that show lymphatic differentiation. Specifically, they are vascular malformations and not vascular tumors as per the 2018 ISSVA classification of vascular anomalies¹. In this report, we describe the case of 5 years old female with a giant swelling on left side of neck. We performed ultrasonography and Contrast CT scan of neck to delineate the origin and extension of Cystic lesion. The purpose of this report is providing an anthological case to define the diagnostic features with imaging techniques.

KEYWORDS

Lymphatic malformation, neck, tumour.

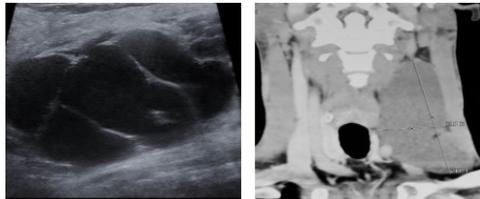
Case history:

A 5 years old female, present with giant painless swelling in left side of neck which was present since birth with gradually increasing size. No past history of trauma. We performed initial neck ultrasonography, which revealed a large and well-defined elongated cystic lesion in left side of neck with internal septa. CT scan of neck was performed to delineate the origin and extension which shows fluid density lesion (HU 12) with enhancing septa extending form C3 vertebral level to superior mediastinum causing mass effect on larynx to contra lateral side.

Investigation:

USG: Large homogeneous cystic lesion of size 14 x 6 cm in left side of neck with few septations

CT Scan neck: Rim enhancing cystic lesion in left side of neck extending from superior mediastinum to base of skull. Mild compression of airway is seen.



Haemangioma

Venous malformation: internal blood flow and central enhancement.

Teratoma: Demonstrate fat or calcification

Conclusion:

Lymphatic malformation can present at any age but most often occur in the pediatric population (~90% in those less than 2 years old 2). The worldwide incidence of lymphangiomas is 1:6000-16000 live births. Males and females are equally affected. This case report emphasizes the importance of diagnostic imaging, that enables a multiparametric evaluation of several cystic neck lesion. This case report summarizes the features of cystic neck lesion with different imaging techniques. Usually lymphangioma is multilocular anechoic clear cystic lesion at ultrasound, but could be also shows internal septa or low level echoes due to haemorrhage or infection. CT scan is performed to delineate the origin, extension and displacement of adjacent structure.

REFERENCES:

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