



ORIGINAL RESEARCH PAPER

Pathology

MUCOEPIDERMOID CARCINOMA: AT UNUSUAL SITE MIMICKING BENIGN CYST

KEY WORDS:

mucoepidermoid carcinoma (MEC), Salivary gland neoplasm, post auricular swelling

Dr Payal Luhar MD Pathology.

ABSTRACT Mucoepidermoid carcinoma is relatively common neoplasm of the major and minor salivary glands. Diagnosing accuracy of post auricular swelling is challenging due to the fact that initially in some cases on cytological examination this tumor were misdiagnosed as a benign cystic lesion. Low grade MEC at times can misleads the clinician because of its atypical location and innocent appearance. This case report emphasizes the need to consider post auricular swelling in the differential diagnosis of parotid malignancy to ensure early diagnosis, complete surgical excision and better prognosis.

INTRODUCTION

Mucoepidermoid carcinoma (MEC) is one of the most common salivary gland malignancy composed of mucinous, intermediate and squamoid tumor cells forming cystic and solid patterns. Most common in children and young adult with peak incidence in second decade of life. MEC generally found between age group of 10 and 16 years. Most common site of MEC is parotid gland followed by minor salivary glands being second most common.

CASE REPORT

A 18 Year old female present with symptoms of Swelling over right post auricular region since 6 month and increasing in size since 2 month. Clinically present as a benign cystic lesion. Radiological finding and cytological examination is suggestive of benign cystic lesion.

On evaluation, patient had a past history of T cell- ALL and taken chemotherapy and radiotherapy 5 year ago. Excision biopsy of cyst was sent for histopathological examination.

Local examination: 1x1 cm2, soft, fixed, cystic, non tender swelling present over right post auricular region.

USG local part: Approximately 19x11 cm2 hypoechoic multi lobular lesion with multiple septation, possibility of Benign cystic lesion.

Gross specimen: Excised tissue from right post auricular region measuring 2x1.5x1 cm3 Greyish white in color and soft in Consistency

Cut section: Cut surface shows multiloculated cystic areas with largest cyst measuring 1.2x1 cm2 in size and filled with yellowish thick material.



Figure 1: gross image of specimen

RESULT

After gross examination of received specimen, sections were given from different representative areas, processed, stained with Hematoxylin and eosin stain. Histological examination shows multicyclic neoplasms mainly lined by simple columnar cells. Focal areas show intracystic nest of epidermoid, intermediate and mucinous cells forming glandular spaces containing mucin as well as at places forming papillary pattern. Intraluminal pools of mucin are also appreciated. Surrounding tissue show lymphoid aggregates and parotid gland tissue also seen. No mitotic

activity is seen. Tumor cells are immunoreactive for p63 and p40 which highlights epidermoid and intermediate cells. Overall histological features are suggestive of Low grade mucoepidermoid carcinoma

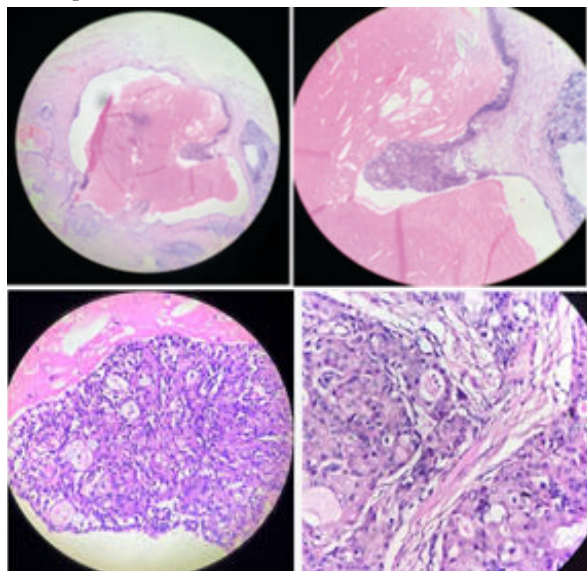


Figure 2 : Microscopic Image Of MEC

DISCUSSION

Mucoepidermoid carcinoma is the most common malignant neoplasm observed in the major and minor salivary glands among children and adults. Mucoepidermoid carcinoma (MEC) accounts for <3% of all head and neck tumors with a female predilection. Parotid gland is the most common site of occurrence with minor salivary gland being second most common. Exposure to chemotherapy and radiotherapy as etiology has been suggested in few cases.

CONCLUSIONS

Mucoepidermoid carcinomas display a variety of biological behaviors and a variable history. Mucoepidermoid carcinoma at post auricular region which is a unusual site of occurrence of MEC. Purpose of this case reports is to provide insight and emphasize the need to consider parotid tumors in differential diagnosis of post auricular clinically benign cystic swelling.

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