Case Report: Intern B 組

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指導老師:口腔病理診斷科全體醫師

General data

- Name:謝X宜
- Sex:男
- Age: 69 y/o
- Native: 屏東市
- Marital status :已婚
- Attending V.S.: 陳中和 醫師
- First visit :99/08/18

Chief Complaint

 Swelling mass over anterior mouth floor for one month

Present Illness

 This 69 y/o male has suffered from a fast growing swelling mass for almost one month with speaking problem, so he comes to our OPD for further evaluation and treatment.

Past history

- Past Medical History
 Liver cirrhosis
 Denied any drug or food allergy
- Past Dental History No data

Personal history

- Risk factors related to malignancy
- Alcohol : (+) 20 years
- Betel quid: (+) 20 years
- Cigarette : (+) 20 years

OMF Examanition

- Size: 5 x5 cm
- Surface: Rough
- Shape: Dome
- Color: Yellow, white
- Consistency: Rubbery
- Pain: (-)
- Tenderness: (+)
- Induration: (+)
- Fluctuation: (-)
- Lymphadenopathy: submandible, bilateral (+)



Differential Diagnosis

Neoplasm or Cyst

- → Neoplasm
- Rough
- Rubbery
- Fluctuation(-)
- Growth (in one month) 5*5 cm
 days → cyst
 more than half year → benign tumor

Malignant or Benign

- → Malignant
- Growth (in one month) 5*5 cm
- Fixed
- Tenderness(+)
- Induration(+)

Peripheral or Intrabony

- → Peripheral
- Mouth floor
- Soft tissue
- Rough

Original site

- Adipose tissue → Liposarcoma
- Muscle → Rhabdomyosarcoma
- Salivary gland(sublingual gland) → Mucoepidermoid carcinoma
- Nerve → Malignant schwannoma
- Epithelium → Spindle cell carcinoma

Working diagnosis

Malignant Schwannoma



 Malignant peripheral nerve sheath tumor is now the preferred name for the spindle cell malignancy of peripheral nerve Schwann cells.

Malignant Schwannoma

- Malignant peripheral nerve sheath tumor
 - =Malignant schwannoma
 - =Neurofibrosarcoma
 - =Neurosarcoma

• It represents approximately 10% of all soft tissue sarcomas and its diagnosis has been called "one of the most difficult and elusive diagnoses in soft tissue diseases."

	Malignant Schwannoma	Our case
Gender	No associated	\Diamond
Age	20~50 but children and elderly persons may also be affected	69
Site	Most head &neck, oral cavity rare Oral site → tongue, the floor of the mouth, palate, gingiva, vestibular mucosa, lips and mental nerve area	Floor of mouth
Shape	Nodule / dome, solitary	Dome
Surface	Smooth	Rough
Base	Sessile	Sessile
Consistency	Elastic tight	Rubbery
Pain	Painless But clinical symptomatology(pain or parathesia) depends on the nerve of origin	(-)
Mobility	Movable to fixed	Fixed
Growth Rate	Slow	Rapid

Liposarcoma



- Liposarcoma is a malignancy of fat cells
- In adults, it is the most common soft tissue sarcoma.
- Liposarcoma
 - =Atypical lipoma
 - =Atypical lipomatous tumor

	Liposarcoma	Our case
Gender	Male > female	\$
Age	40~60, middle-aged	69
Site	Head & neck rare Oral site → cheek, floor of mouth, lips and soft palate	Floor of mouth
Shape	Dome	Dome
Color	Yellow	Yellow
Consistency	Soft	Rubbery
Pain	Uncommon	(-)
Tenderness	Uncommon	(-)
Growth Rate	Slow But some lesions grow rapidly and become ulcerated early	Rapid

Rhabdomyosarcoma

- Malignant neoplasm of skeletal muscle origin
- Most frequent is the head and neck
- Embryonal type
- Alveolar type
- Pleomorphic type

Rhabdomyosarcoma

	Rhabdomyosarcoma	case
Age	Embryonal type: 0~10 year Alveolar type: 10~25 year Pleomorphic type: over 40 year	69
Time	Rapidly	Rapidly
Gender	Male	Male
Site	Palate	Mouth floor
Size	-	5 x 5 cm
Surface	Smooth	Rough
Shape	Polypoid	Dome
Color	Relate to adjacentmucosa	Yellow
Consistency	Soft	Rubbery
Pain	Painless	Painless

Rhabdomyosarcoma

	Rhabdomyosarcoma	case
Fluctuation	(-)	(-)
Tenderness	(-)	(+)
Mobility	(+)	(-)
Induration	(-)	(+)

Mucoepidermoid carcinoma



The most common salivary gland malignancies

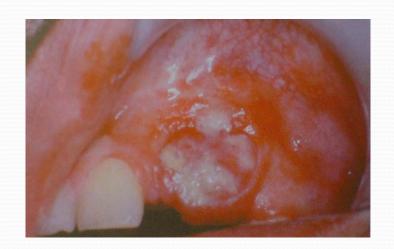
Mucoepidermoid carcinoma

	Our Case	Mucoepidermoid carcinoma
Gender	M	F > M (slightly)
Age	69	Wide range (10-70 y/0)
Site	Floor of mouth	Parotid > minor glands
Color	Yellow (normal, white, red and even black)	Blue or red color
Surface	Rough	Smooth
Size	5.0 x 9.0cm	-
Swelling	+	+
Shape	Dome shaped	Dome shaped

Mucoepidermoid carcinoma

	Our Case	Mucoepidermoid carcinoma
Pain	-	- (usually asymptomatic swelling)
Fluctuations	-	+
Consistency	Rubbery	
Lymphadenopathy	+, fever	If distant metastasis
Rapid growth	+	

Spindle cell carcinoma



• Dysplastic surface squamous cell epithelium in conjunction with an invasive spindle cell element

Spindle cell carcinoma

	Our Case	Squamous cell carcinoma
Gender	M	-
Age	69	29~93
Site	Floor of mouth	Lower lip, lateral posterior tongue, alveolar ridge
Color	Yellow (normal, white, red and even black)	_
Surface	Rough	Rough May be ulcerative
Size	5.0 x 9.0cm	varied
Swelling	(+)	Varied
Shape	Dome shaped	Varied

Spindle cell carcinoma

	Our Case	Squamous cell carcinoma
Pain	-	+
Induration	+	+
Consistency	Rubbery	Firm
Lymphadenopathy	+, fever	If distant metastasis
Rapid growth	+	+

Clinical diagnosis

Malignant Schwannoma over floor of mouth

• Reference:

- Schwannoma located in the palate: Clinical case and literature review Med Oral Patol Oral Cir Bucal. 2009 Sep 1;14 (9):e465-8.
 Carmen López-Carriches
- Oral & Maxillofacial Pathology
- Differential Diagnosis of Disease of the Oral Mucosa
- Oral pathology and oral medicine
- Surgical Pathology of the mouth and Jaws