

## DIAGNOSTIC CHALLENGE

# Unilateral facial swelling

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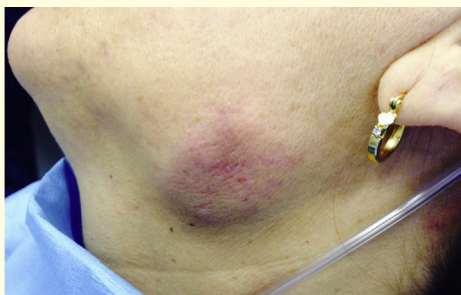
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### THE CHALLENGE

**W**e examined a 51-year-old woman in good health in the Columbia University Salivary Gland Center. Her chief symptom concerned “a swelling in my face” that had been present for at least 9 months (Figure 1). There had been a slow increase in its size but an absence of discomfort.

Extraorally, the swelling was centered over the mandibular left angle area. It measured approximately 3 centimeters in diameter with a reddish discoloration of the overlying skin. Palpation of the swelling caused no pain. The mass was well circumscribed, firm, superficially located in the tissues, and readily movable with no attachments to the overlying skin or underlying tissues. There was no facial nerve deficit or cervical lymphadenopathy.

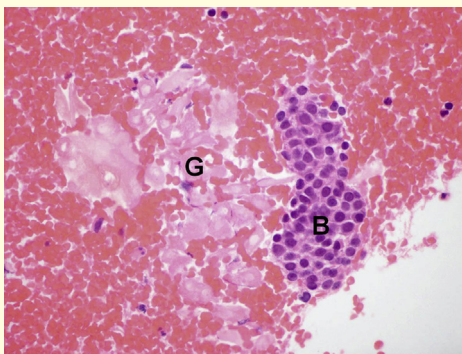
A computed tomographic (CT) scan revealed a well-defined soft-tissue mass located in the subcutaneous tissues on the left side (Figure 2). We thought it was a benign entity but could not rule out malignancy. We correlated the CT findings with tissue sampling. Our institution’s cytopathologist performed fine-needle aspiration biopsy (FNAB) by inserting a 25-gauge needle into the mass and aspirating cells into the needle’s lumen. Microscopically, the aspirated specimen consisted of ghost cells and small to intermediate size basaloid cells arranged singly and in sheets (Figure 3). We referred the patient for surgical removal of the mass.



**Figure 1.** Clinical view of extraoral swelling on the left side.



**Figure 2.** Coronal contrast material-enhanced computed tomographic scan showed well-defined subcutaneous soft-tissue mass (arrow) on the left side. L: Left. R: Right.



**Figure 3.** Microscopic appearance of basaloid cells (B) and ghost cells (G) surrounded by red blood cells obtained by means of fine-needle aspiration biopsy (hematoxylin-eosin stain,  $\times 600$  original magnification).

### CAN YOU MAKE THE DIAGNOSIS?

- |                                     |                    |
|-------------------------------------|--------------------|
| A. parotid pleomorphic adenoma      | D. pilomatrixoma   |
| B. parotid mucoepidermoid carcinoma | E. acute parotitis |
| C. epidermal inclusion cyst         |                    |

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