

Cancers of Major Salivary Glands



Aru Panwar, MD^{a,*}, Jessica A. Kozel, MD^b, William M. Lydiatt, MD^c

KEYWORDS

• Salivary glands • Cancer • Malignancy • Neoplasm

KEY POINTS

- Major salivary gland malignancies are a rare but histologically diverse group of entities.
- Establishing the diagnosis of a malignant salivary neoplasm may be challenging because of the often minimally symptomatic nature of disease, and limitations of imaging modalities and cytology.
- Treatment is centered on surgical therapy and adjuvant radiation in selected scenarios.
- Systemic therapy with chemotherapeutic agents and monoclonal antibodies lacks evidence in support of its routine use.

Salivary gland malignancies are rare tumors with an estimated population incidence of 1.2 per 100,000.¹ These tumors constitute about 5% of all head and neck malignancies and tend to occur most frequently among men.^{2,3} Most salivary gland tumors arise in the parotid gland. Although benign neoplasms outnumber malignant tumors, most malignant salivary gland tumors involve the parotid gland; typically in the superficial lobe. The other major salivary glands, the submandibular and sublingual glands, have a higher proportion of malignant versus benign tumors, but these constitute a minority of all primary salivary malignancies.⁴

The cause for malignant salivary gland tumors has not been clearly defined. Ionizing radiation may play a role in development of these malignancies.⁴⁻⁷ Tobacco and alcohol use have not been reliably proven to be causative in salivary gland malignancies.⁸ Similarly, exposure to wireless phones has not been associated with these tumors.⁹⁻¹¹

HISTOLOGIC CLASSIFICATION AND STAGING

Salivary gland malignancies represent a cohort of varied histopathologic subtypes, and the revised World Health Organization (WHO) classification identifies 23 separate

Disclosures: The authors have nothing to disclose.

^a Division of Head and Neck Surgery, University of Nebraska Medical Center, 600 S, 42nd Street, Omaha, NE 68198, USA; ^b Department of Pathology and Microbiology, University of Nebraska Medical Center, Omaha, NE, USA; ^c Division of Head and Neck Surgery, Nebraska Methodist Hospital, 8303 Dodge Street, Omaha, NE 68114, USA

* Corresponding author. 981225 Nebraska Medical Center, Omaha, NE 68198-1225.

E-mail address: aru.panwar@unmc.edu

Surg Oncol Clin N Am 24 (2015) 615–633

<http://dx.doi.org/10.1016/j.soc.2015.03.011>

surgonc.theclinics.com

1055-3207/15/\$ – see front matter © 2015 Elsevier Inc. All rights reserved.

primary salivary gland malignant tumors (**Box 1**).¹² In addition, several tumors may show a spectrum of histologic grades that have disparate clinical profiles relating to their local aggression, risk for regional and distant metastases, and overall prognosis. The diverse nature and clinical behavior of these tumors pose unique difficulties in generating uniformity in staging and prognostic information.

The current staging system offered by the American Joint Committee on Cancer (AJCC) accounts for characteristics of the primary tumor (T stage), regional lymph node status (N stage), and presence or absence of distant metastases (M stage).¹³ However, the staging system does not factor the histologic grading of tumors, and fails to distinguish more indolent forms of disease from aggressive variants (**Table 1**). Thus, staging information should not be the sole determinant of the management offered,

Box 1

WHO classification of salivary gland malignancies

Acinic cell carcinoma
 Mucoepidermoid carcinoma
 Adenoid cystic carcinoma
 Polymorphous low-grade adenocarcinoma
 Epithelial-myoeplithelial carcinoma
 Clear cell carcinoma, not otherwise specified
 Basal cell adenocarcinoma
 Sebaceous carcinoma
 Sebaceous lymphadenocarcinoma
 Cystadenocarcinoma
 Low-grade cribriform cystadenocarcinoma
 Mucinous adenocarcinoma
 Oncocytic carcinoma
 Salivary duct carcinoma
 Adenocarcinoma, not otherwise specified
 Myoepithelial carcinoma
 Carcinoma ex pleomorphic adenoma
 Carcinosarcoma
 Metastasizing pleomorphic adenoma
 Squamous cell carcinoma
 Small cell carcinoma
 Large cell carcinoma
 Lymphoepithelial carcinoma
 Sialoblastoma

From Eveson JW, Auclair PL, Gnepp DR. Tumors of the salivary glands: introduction. In: Barnes L, Eveson JW, Reichert P, et al, editors. Pathology and genetics of head and neck tumors. Lyon (France): World Health Organization Classification of Tumors; IARC Press; 2005. p. 210, with permission.

Download English Version:

<https://daneshyari.com/en/article/3998539>

Download Persian Version:

<https://daneshyari.com/article/3998539>

[Daneshyari.com](https://daneshyari.com)