



Lipoma in Neck- A Case Report

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Abstract

Introduction: Lipomas as the name suggests these are the benign mesenchymal tumors of adipose layer. It usually has unknown etiology, however, a history of preceding trauma which leads to breakdown of the adipose layer and abnormal growth has been suggested. They have characteristic appearances on ultrasound study and do not require FNAC (unless risk of malignant transformation is suspected). In case of large lipomas, CT and MRI scanning may be useful in assessing the anatomy and aid surgical planning.

Case Presentation: A 55-year-old male patient presented to the otorhinolaryngology OPD with a swelling over right submandibular area since 6 years and was painless in nature. High resolution sonography which was suggestive of ill-defined homogenous lesion in superficial plane. Patient underwent surgical excision and histopathological examination revealed out lipoma.

Conclusion: It is always safe and effective way that the tumor to be subjected to proper radiological evaluation to know the extent of tumors for its proper and complete excision and to prevent recurrence.

Keywords: Lipomas; Histopathological; Etiology; Tumors

Introduction

Lipomas as the name suggests these are the benign mesenchymal tumors of adipose layer. It usually has unknown etiology, however, a history of preceding trauma which leads to breakdown of the adipose layer and abnormal growth has been suggested [1]. The adipose cells in the tissue are organized into large lobules divide by fibrous septa. In few circumstances lipomas can be multiple and occasionally painful (in case of Dercum's disease). Although the majority of lipomas are sporadic a minority can be familial [2]. The most common familial lipomatosis affecting the head and neck is Madelug's lipomatosis. In the neck region, lipomas may be subfascial or arising within the muscles which grow very slowly and have a very low risk of malignant transformation.

Lipomas usually occur in adults and have a variable size which has a smooth, lobulated surface with a well-defined edge. They tend to be soft, and as they lie below the dermis, the overlying skin can be moved above the lesion [3]. They have characteristic appearances on ultrasound study and do not require FNAC (unless risk of malignant transformation is suspected). In case of large lipomas, CT and MRI scanning may be useful in assessing the anatomy and aid surgical planning [4].

Case Presentation

A 55-year-old male patient presented to the otorhinolaryngology OPD with a swelling over right submandibular area since 6 years and was painless in

nature. He had no specific history of trauma. On examination the swelling was extending down towards neck (over digastrics triangle), soft, non-tender, mobile overlying skin and local rise of temperature. He underwent high resolution sonography which was suggestive of ill-defined homogenous lesion in superficial plane measuring 42 X 24 X 39 mm with no internal vascularity and calcifications.

With proper workup he was posted for surgical intervention under GA, a horizontal incision was given over a 2-finger breadth below the mandible and blunt dissection of soft tissue done. On reaching the sub-platysmal plane, a soft multilobular lesion was found. It was found to be attached to posterior belly of digastric muscle which was dissected and separated out. Other margins were clearly separated and excised out and sent for histopathological examination. Then the dissected area was examined and sutured in two layers including skin. Histopathological examination revealed out to be a benign tumor of adipose tissue-lipoma.

Differential Diagnosis

Soft painless swelling over submandibular area includes causes like lipoma, dermoid cyst, lymphoma and other neuronal pathologies.

Outcome and Follow Up

Patient had relief during post-operative period and had no symptoms during follow up for 3 months. Patient also had no recurrence during the follow up period.

Discussion

Rashwan MS, et al. [5] documented a case report of 59-year-old male patient with a soft swelling extending over angle of mandible to clavicle on right side and later the patient underwent excision. The tumor was comparatively superficial in our study and presentation was almost in the same age group. So, the tumor has to be subjected to proper radiological evaluation to know the extent of tumors for its proper and complete excision.

References

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