



A Lump in the Lacrimal Gland Region: Is it Orbital Schwannoma?

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Abstract

There are several causes for a mass in the lacrimal gland region. The reported common causes include inflammatory and neoplastic that can manifest in many different forms like upper eyelid fullness, alteration of eyelid contour and displacement of the globe. The objective of this paper is to report two cases of orbital Schwannoma that presented with clinical manifestations of lacrimal gland pleomorphic adenoma and discuss the challenges in diagnosing and managing some unusual cases of a mass in the lacrimal gland region.

Keywords: Schwannoma; Supero-Lateral; Plexiform

Introduction

The lacrimal gland is located anteriorly in the supero-lateral aspect of the orbit. It has two main parts: orbital and palpebral. The serous cells of the gland produce a watery serous secretion. Dacryoadenitis and pleomorphic adenoma are the most common diseases in the lacrimal gland. Pleomorphic adenomas arise usually from the orbital lobe [1,2]. There are several causes for a mass in the lacrimal gland region. The reported common causes include inflammatory and neoplastic that can manifest in many different forms like upper eyelid fullness, alteration of eyelid contour and displacement of the globe. Pleomorphic adenoma is extremely rare before the age of 20 years [3]. However, some cases have been reported. A 15-year-old boy presented with the initial signs of idiopathic orbital inflammation and a mass in the supero-lateral orbit. But, later on, after surgical excision it was histopathologically proven to be pleomorphic adenoma of the lacrimal gland [3]. The objective of this paper is to report two cases of orbital Schwannoma that presented with clinical manifestations of pleomorphic adenoma and discuss the challenges in diagnosing and managing some unusual cases of any mass in the lacrimal gland region.

Case 1

A 35-year-old-man presented with a painless, slowly growing, supero-temporal, left orbital mass of 10 years duration. After clinical evaluation and imaging, a provisional diagnosis of lacrimal gland pleomorphic adenoma was made. The mass was completely excised using the trans-periosteal supero-lateral orbitotomy. The gross specimen of the mass appeared to be obliquely round with a multi-nodular surface and was about 30 mm in diameter Figure 1. The histopathological evaluation revealed a plexiform Schwannoma.

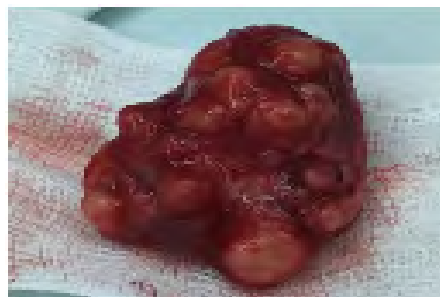


Figure 1: Plexiform Schwannoma of the lacrimal gland region that was obliquely round with a multi-nodular surface.

Case 2

A 45-year-old lady with a painless supero-temporal mass that had led to a non-axial displacement of the globe underwent

trans-periosteal lateral orbitotomy under general anesthesia. The mass was 32 mm in size and was characterized by a multi-nodular surface with firm consistency Figure 2. This was also proven histopathologically to be a plexiform Schwannoma.

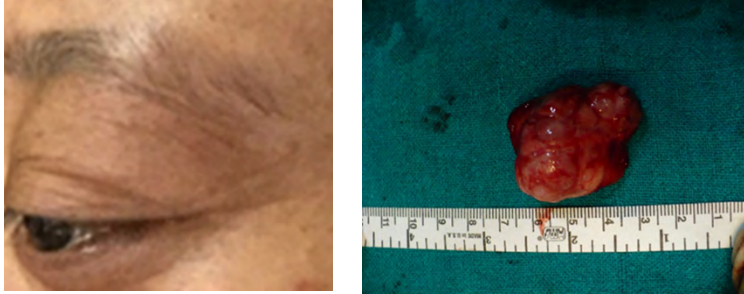


Figure 2: Plexiform Schwannoma of the lacrimal gland region leading to a non-axial displacement of the globe and the gross appearance of the multi-nodular mass.

These two cases were different from each other in terms of gender and age. The masses were similar in their size, location in the lacrimal gland region and the gross appearance of multi-nodularity. Both the cases had been initially diagnosed based on their clinical appearance as pleomorphic adenoma of the lacrimal gland. A Schwannoma is usually a benign tumor that arises from the nerve sheath. Schwannomas of orbit in the lacrimal gland region have been reported [4]. The diagnostic dilemma apparently seems to arise from its location and clinical manifestation. Delayed presentation with a large size of the tumor seems to be common in the developing world. The two cases presented in this paper had a morphologically similar multi-nodular appearance and firm consistency. A lump in the lacrimal gland region can be a plexiform variant of a Schwannoma.

References

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