A Case Report On Neurolemmoma (Schwannoma) of Face

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Abstract

The Neurolemmoma (Schwannoma) is a rather common tumour accepted by most investigators today to be derived from Schwann cells. Neurites are not a component of the tumour as in the neurofibroma but may be found on the surface of tumour. Tissue culture studies suggest the Schwann cells as the site of origin. A case of schwannoma on left side of face in a 23 yrs old female patient has been reported.

Introduction

vailable clinical evidence indicates that the neurolemmoma is a slowly growing lesion and is usually of long duration at the time of presentation by the patient. But other varieties of tumours does exhibit a relatively rapid course. Despite the fact that these tumours originate from nerve tissue, they are usually painless unless they are causing pressure onadjacent nerves. Majority of patients report with the presence of tumour mass. **Case Report**

A 23 yrs old female patient reported to the dept. of dental surgery for the treatment of a swelling on left side of face for a period of $2\frac{1}{2}$ months. On examination, a diffused soft tissue swelling was present on left side of face which was slowly growing in nature; non-tender and non pulsatile. Intra-oral examination showed no mal-functioning tooth& oral lesions to be associated with the swelling. FNAC being done was suggestive of sialodenitis after which CT-Scan report suggested it to be schwannoma.

After consideration of the clinical reports it was thereby decided to go for surgical intervention of the soft tissue growth under general anaesthesia.Over the swelling on the skin an incision was made & dissection was carried out deep.The whole tumour was dissected out by finger. The subcuticular suture with 4-0 Prolenewas given for cosmetic purpose. Specimen was thereby sent for histopathological examination which confirmed the diagnosis. The patient was followed up for 6 months & result was uneventful with cosmetically acceptable scar.

The head and neck are rather common regions for the development of this neoplasm as shown by the report of Ehrlich and Martin with a variety of oral and paraorallocations to be involved as well. Furthermore in a series of 303 patients reported by Das Gupta & associates; 136 occurred in head and neck. Intra-oral soft-tissue neurolemmomas have also been reported by Hatziotis&Asprides along with the involvement of salivary glands as well. Histologically the tumour is being composed of two types of tissue; Antoni type-A and Antoni type B respec-tively. Verocaybodies, present in this kind of tumour of great importance and is the fact that in nearly all instances the tumour is encapsulated.

The treatment of such tumour is surgical excision as this lesion is not responsive to radiation. Since, it is an encapsulated tumour, little difficulty is encountered in its complete removal, chances of recurrence is uncommon and does not undergo malignant transformation as was seen in the case being reported here.

Conclusion

A rare case of schwannoma of left side of face has been reportedhere which responded well to the treatment without any sign of recurrence or malignancy.

References

- Shafer's Textbook of oral Pathology, 5thed, 2005; Benign and Malignant Tumours of theoral Cavity 113:282-283.
- Chen Sy, Miller AS, Neurofibroma &schwannoma of the oral cavity, oral surg, 47:522,1979.
- Das Gupta, T Brasfield, R D Strong EW, Hajdu SI, BenignSolitary Schwannomas (neurile momas) cancer, 24:355, 1969.
- Hatziotis JC, Asprides H: neurilemoma (Schwannoma) of the cavity, oral surg, 24:510, 1967.
- Ehrlich HE, Martin H. Schwannomas (neurolemmomas) in the head & neck surg, Gynecolobstetric, 76:577,1943.

Photographs:-



