

## Neurofibroma- A Rare Oral Finding Case Report

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**A** 19-year-old male patient presented to the Department of Oral Medicine and Radiology, Kothiwal Dental College and Research Centre with a chief complaint of small swelling present on the upper left vestibular region since 2 months. The swelling was not causing any pain except for slight discomfort & patient became overly concerned and worried of the swelling.

On clinical examination, no obvious swelling seen extra orally. Even the intra oral examination revealed no significant finding. On palpation, a firm, nodular mass was appreciated on the upper left vestibular region opposite to 2nd molar measuring about 2x2 cm which was slightly movable and not fixed to underlying structure.



Figure 1- Extra Oral and Intra Oral Pictures

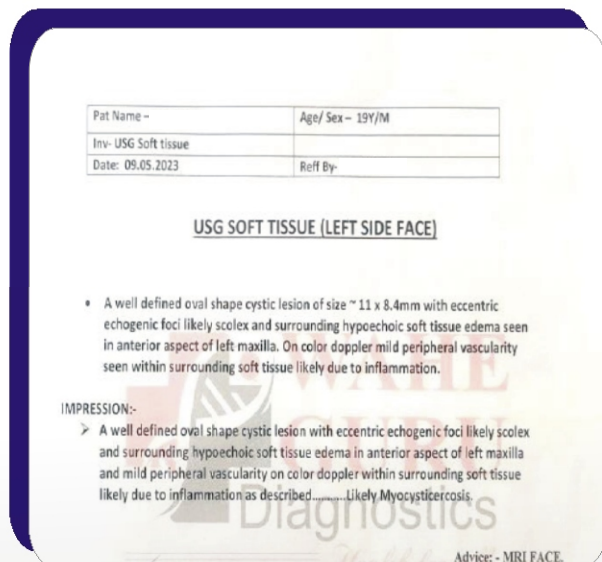


Figure 2- Ultrasonography report

Based on history and clinical findings the provisional diagnosis of minor salivary gland tumour w.r.t. left upper vestibular region was made. However, the following lesions considered as differential diagnosis-

1. Lipoma
2. Myocysticercosis.
3. Neuroma

### Investigations-

**1. Ultrasonography-** ultrasonography report reveals a well-defined oval shape cystic lesion with eccentric echogenic foci likely scolex and surrounding hypoechoic soft tissue oedema in anterior aspect of left maxilla and mild peripheral vascularity on colour dopper within surrounding soft tissue. And made the diagnosis of myocysticercosis.

2. **Excisional Biopsy** - revealed fibro-cellular connective tissue stroma. This connective tissue stroma shows proliferating elongated fibroblasts with elongated and wavy nuclei in association with dense collagen fibres, numerous mast cells, endothelial lined blood vessels filled with RBCs. Numerous nerve bundles are also seen and infiltration of chronic inflammatory cells predominantly consists of lymphocytes and plasma cells. So histopathologic diagnosis was **neurofibroma**.



**Figure 3-** Excisional Biopsy Specimen

The patient has reported to our hospital after three months duration for follow-up and there was no recurrence of the lesion.