Case Report

Pleomorphic adenoma of the lower lip: A rare site of location

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Abstract

Context: Pleomorphic adenoma is the most common neoplasm of the minor salivary glands which are uncommon among the entire salivary gland tumors. The lower lip is a very rare site of occurrence for pleomorphic adenoma. We intended to present a case of pleomorphic adenoma of the lower lip. Case Report: A 49-year-old Turkish man presented with the painless mass on his lower lip. A total excision was choiced for the mass by both we and the patient because of some cosmetic reasons. The histopathological evaluation revealed the diagnosis of pleomorphic adenoma and neither complication nor recurrence was observed during a clinical follow-up for 40 months. Conclusions: A clinician should be vigilant for the possibility of existence of a pleomorphic adenoma located on the lower lip even it is rare. Once it is diagnosed concisely, a wide excision is suggested in general if there is no cosmetic care and no risk of damage to functional structures of head and neck.

Keywords: Salivary glands, lip, pleomorphic, adenoma.

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Introduction

The majority of oral soft tissue masses have benign nature. However, appearance of these benign masses may resemble the malignant tumors. Thus, distinguishing benign masses from the malign masses is critical to further prognosis and treatment [1]. Tumors of minor salivary glands are not common and accounts for 10-25% of whole salivary glands tumors. Pleomorphic adenoma (benign mixed tumor) is the most common neoplasm of the minor salivary glands [2]. This benign lesion also may be misdiagnosed as malignant due to increased cellularity, nuclear atypia in the often predominant myoepithelial component, or pseudoepitheliomatous hyperplasia of the overlying mucosa. We aimed to present an unusual case of pleomorphic adenoma on the lower lip in a male.

Case Report

A 49-year-old Turkish man presented with the complaint of painless swelling just beneath the lower lip. His medical and family history was uneventful. On the physical examination, the mass was sized approximately in 1.5x0.7 Cm. having an appearance of lobulating and protruding from the skin. No any hyperemia or changing of color inspected on the surface of the skin. It was located on the left side, adjacent to the lower lip (Figure 1). Any other mass or lesion notable was not observed in the oral cavity even on the region of head and neck. The mass was palpable, protruded from the skin, and giving a sense of lobulation, but not firm in nature. It was a soft mass, but it had neither fluctuated region nor a fistula and/or leakage on it. Furthermore, examination of the other systems were normal. After having an informed consent from the patient, an excisional biopsy was performed under local anesthesia by means of a transverse incision parallel to the inferior border of the lower lip. It was not extended from the subcuticular tissue to the deep compartments of the soft tissue and the fascial layers (Figure 1). The resected mass was sized as 1.5 cm in diameter in its long axis (Figure 2). After total resection, incision was sutured primarily. The histopathological examination with haematoxylin and eosin revealed the diagnosis of pleomorphic adenoma.
The patient recovered uneventfully and clinical follow-up for 40 months after resection exhibited no evidence of local recurrence or other occurrence on the head and neck and the other parts of the body.

(Figure 3). In the treatment of pleomorphic adenoma, wide resection with negative margins is frequently recommended as an optimal choice. Because, almost half of all tumors originating from minor salivary glands are proclaimed as malignant. So, even fine-needle aspiration or incisional biopsy was suggested before the definitive surgery. Additionally, a recurrence rate of 2-44% has been declared in the literature since 1939 [3]. Krolls et al [5] asserted that inefficient first surgical intervention was the main cause of recurrences. However, Dongre et al [6] propounded that simple excision was the only treatment for it. Disadvantages of wide excision of extra-major salivary gland pleomorphic adenoma may be summarized as cosmetic care particularly for upper and lower lips, eyes, and face in general, and probability of injury to functional structures of head and neck such as upper and lower lip, and palate. So, we and the patient chose just a total excision for the mass of the presented case due to some cosmetic reasons. The patient recovered uneventfully and no recurrence was observed during a clinical follow-up for 40 months. However, we offer wide excision for the treatment of extra-major salivary gland pleomorphic adenoma especially for the selected cases.

In summary, tumors of the minor salivary glands are uncommon among entire salivary glands tumors.
Pleomorphic adenoma is the most frequent neoplasm of the minor salivary glands, mostly seen in women. The lip is a rare site of occurrence for pleomorphic adenoma. Besides, the lower lip is a more seldom location than the upper lip. So, we presented a pleomorphic adenoma of the lower lip in a man. Wide surgical excision is recommended due to possibility of both recurrence and being a malignant tumor after a pathological examination. However, this technique may be compromised and problematic because of cosmetic reasons and likelihood of damage to functional structures.

We would like to emphasize that a clinician must be vigilant for the possibility of a mass on the lower lip may being a pleomorphic adenoma or a malignant form of it though it is a rare site of occurrence. Besides this, approximately 50% of all tumors derived from the minor salivary glands are malignant.

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