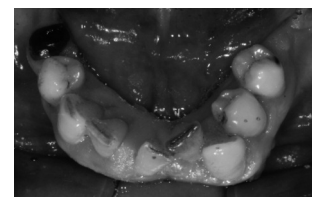


Case Report

Oral squamous cell carcinoma presenting as a cervical lymphadenopathy



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Introduction. Oral squamous cell carcinoma originates from epithelium of oral mucosa and it is the most frequent type of cancer in this region. Clinical presentations include white and red lesions, ulcerated areas and/or swelling.

Case details. Mr. EF is a no smoker 68-year-old man, affected by hypertension and diabetes, under pharmacological therapy. He was visited in the department of maxilla-facial surgery of our hospital because of a submandibular swelling, appeared about 2 months before on the left side of the neck. A preliminary needle aspiration of the lesion was performed by the surgeon, which showed presence of OSCC cells.

Because of the lack of an evident intraoral lesion of neoplastic nature, the patients was referred to our service for a visit. At physical examination, a large cervical node of hard consistency was present, while intraoral examination showed poor oral hygiene and signs of periodontal disease. It was not present any clinically evident sign of oral cancer, although it was noticed a small lesion of the floor of mouth, close to the left sublingual caruncle, with a consistency harder than the surrounding mucosa.

We carried out an incisional biopsy of the lesion, which confirmed the diagnosis of squamous cell carcinoma. The patient underwent surgical treatment and neck dissection.

Conclusions. What we learnt from this case is that even a small and apparently innocent mucosal lesion can be a cancer of the mouth. And that even a nearly invisible squamous cell carcinoma can spread to cervical lymph nodes.

References

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