

INTRASINUSAL SCHWANOMA RECIDIVE AFTER 7 YEARS

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INTRODUCTION

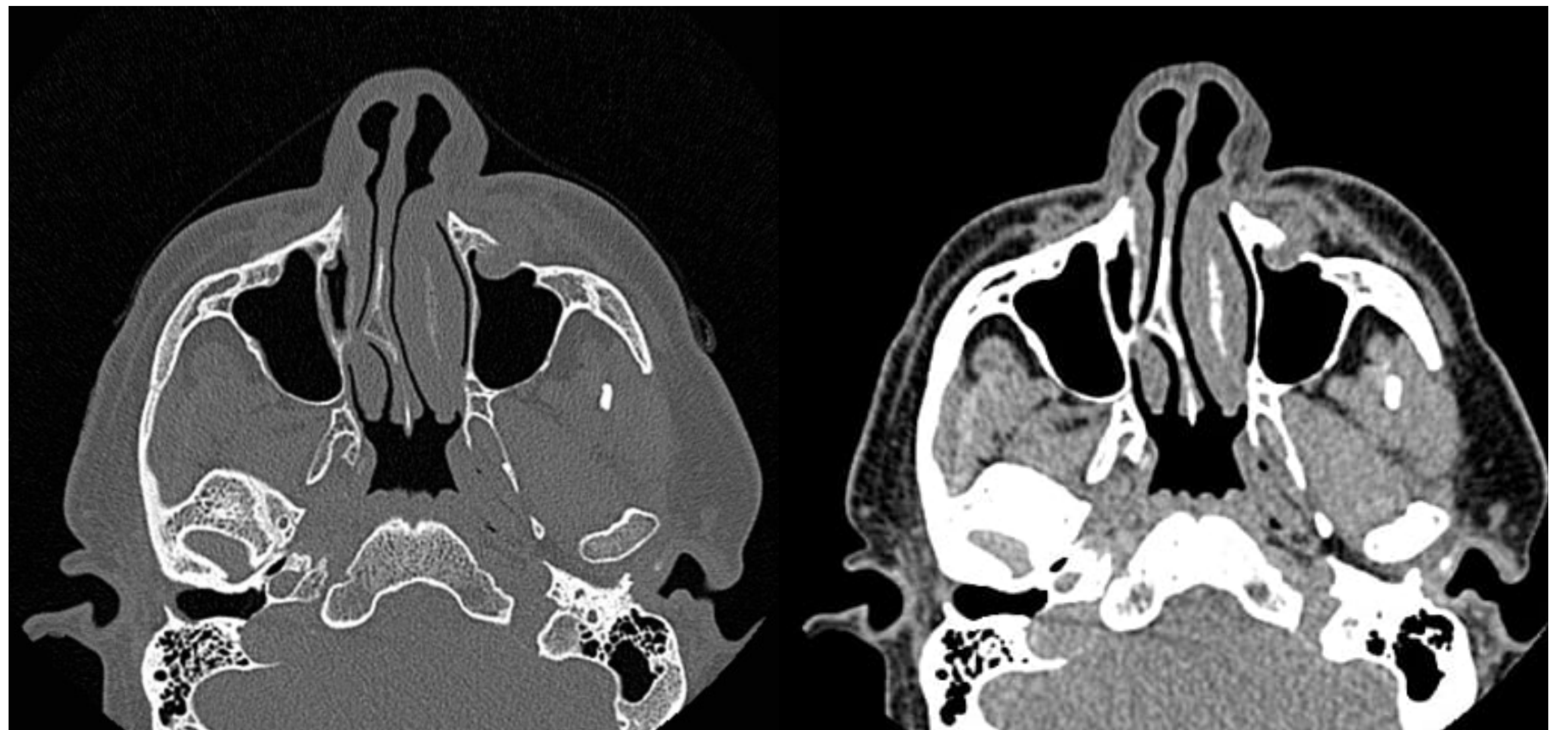
Schwanoma, also known as neurilemoma, is a benign neural neoplasm derived from the schwan cells, relatively uncommon, which 24% to 48% of cases occurring in the head and neck. It is a slow-growing encapsulated tumor that typically appears in association with a nerve trunk, pushing the nerve to the side. Usually asymptomatic, but there may be pain or tenderness. It commonly occurs in young and middle-aged adults. Tongue is the most affected site, but it can occur at any intraoral site. Eventually, they are intraosseous, usually in the posterior mandible. Infraorbital and intrasinusal lesions are extremely rare, with very few cases reported. Histopathologically, it is and encapsulated lesion with two distinct microscopic patterns: Antoni A and Antoni B. Treatment consists of surgical excision and recidiva is rare.



Fig. 1. Extraoral view showing no swelling. Fig. 2. Intraoral view showing no alterations.

CASE REPORT

A 38-year-old white man attended and outpatient clinic complaining of “swelling in the region near the eye”. Physical examination showed an increase in painful volume on palpation in the left infraorbital region. The patient reported that he had undergone previous excisional biopsy in the same region, in 2013, with a previous schwanoma histopathological diagnose. Soft tissue window CT scans showed a lesion in the region of the infraorbital foramen, with sinus invasion. A biopsy was planned to excise the lesion. In the trans-surgical period, it was found that the lesion was fully adhered to the infraorbital nerve at the exit of the foramen, requiring the section of the nerve together with the lesion to ensure that there was no recurrence. Histopathological analysis showed schwanoma. The patient evolved well, but he had paresthesia in the left infraorbital region. A new imaging exam showed total removal of the lesion, and the patient is being followed up.



Figs. 3 and 4. Lesion can be observed in preoperative CT scans.



Figs. 5 and 6. Preoperative CT scans.

CONCLUSION

Although they are uncommon lesions in the infraorbital region, schwanoma must be placed within the diagnostic hypothesis when there are symptomatic lesions close to nerves.

Authors declare there is no conflicts of interest