

EXTRAORAL
SWELLINGS OF THE
HEAD AND NECK

LATERAL NECK MASSES



Nonspecific Lymphadenitis

- Adenopathy secondary to:
 - Odontogenic infection
 - Upper airway infection
 - Mononucleosis
 - Other viruses
- Tender, soft, movable
- Febrile

Nonspecific Lymphadenitis

- Odontogenic infection
- Clinical



Branchial Cleft Cyst

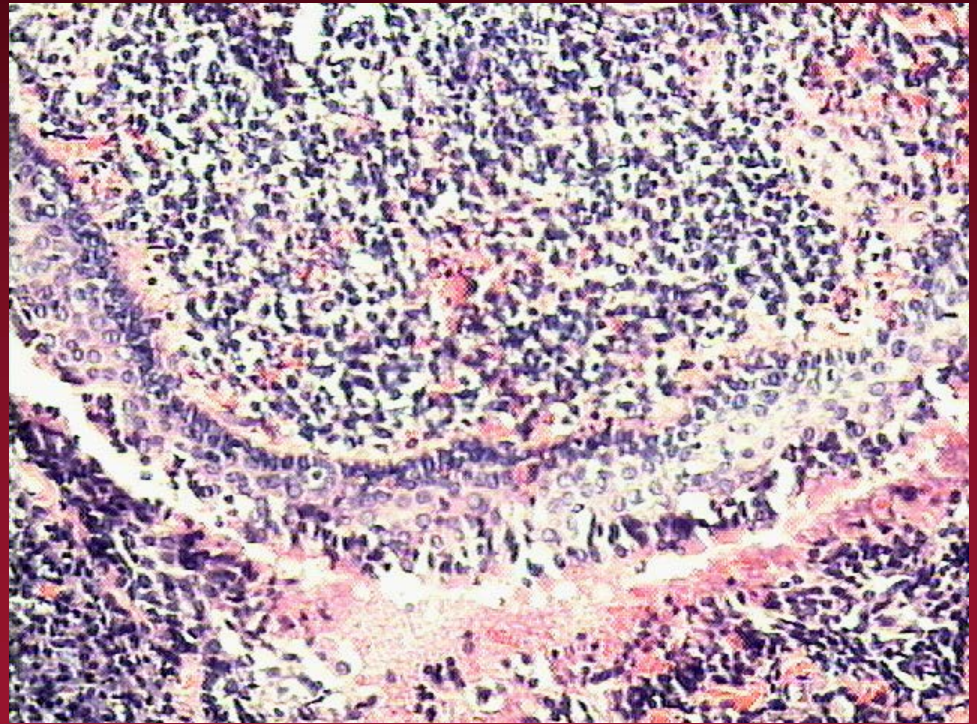
- Onset in childhood
- Soft, Fluctuant, Movable
- Painless
- Carcinomatous change
very rare

Branchial Cleft Cyst

Clinical



Histopathology



Granulomatous Lymphadenitis

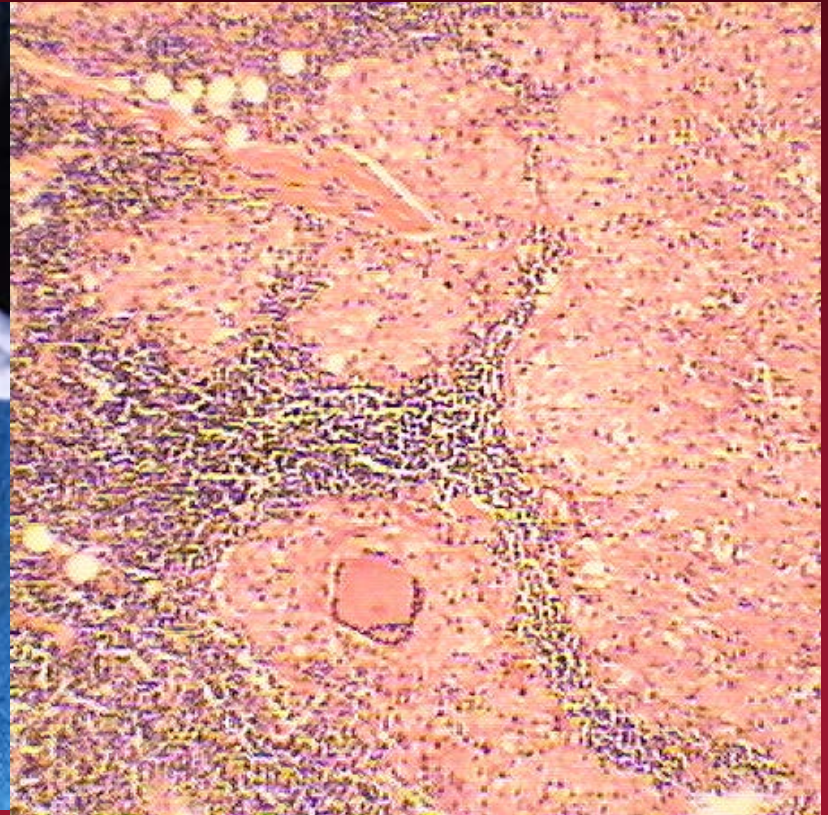
- Specific Infections
 - Mycobacteria
 - Bartonella (Cat Scratch)
 - Actinomyces
- Firm, movable
- Painless
- Drainage/fistula
sometimes present

Scrofula

Clinical



Granulomatous
Lymphadenitis

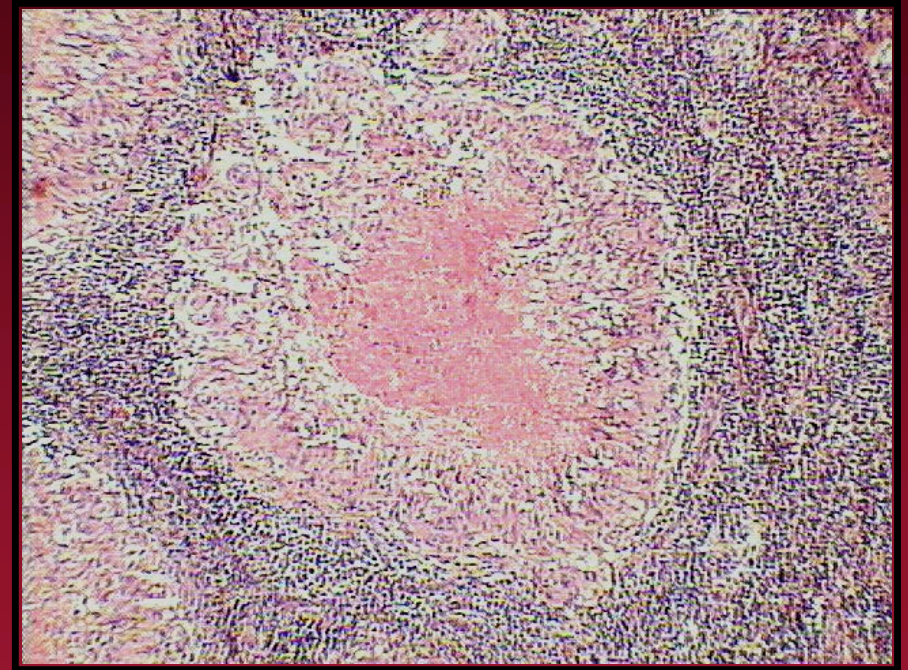


Cat Scratch Fever

Clinical



Histopathology

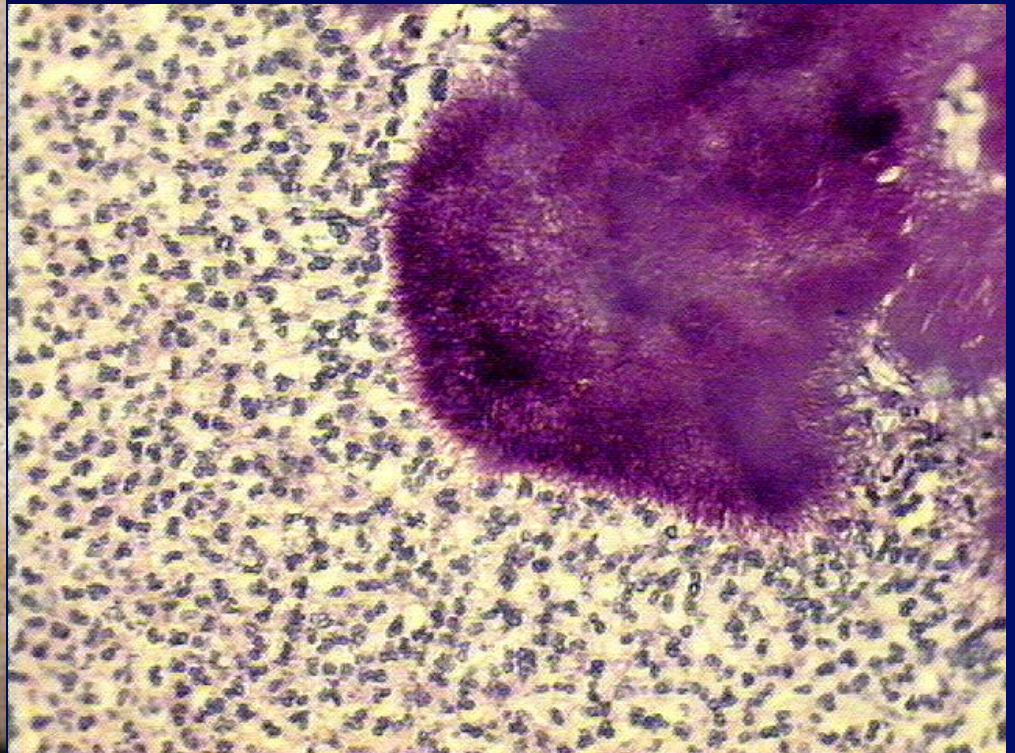


Actinomycosis

- Clinical



- Colonies/PMNs



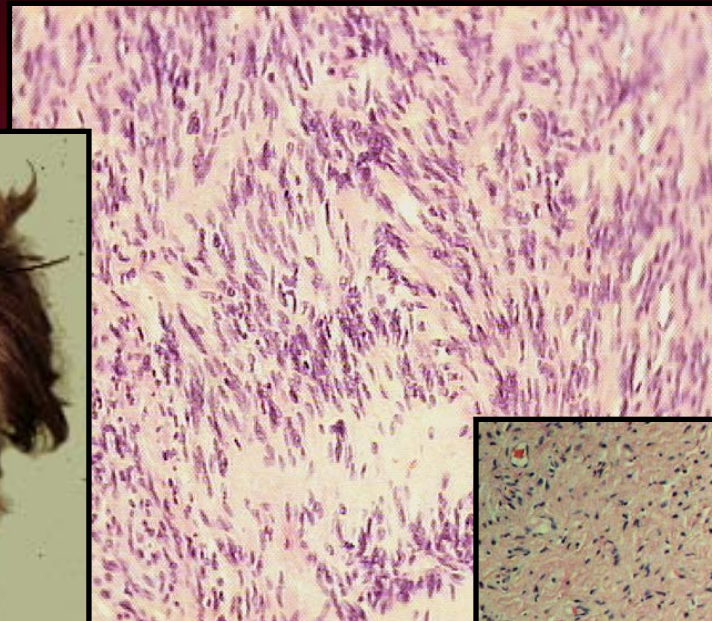
Mesenchymal Neoplasms

- Benign
 - Soft, movable
 - Lipoma, Schwannoma
 - Cystic hygroma
 - Fibromatosis, Torticollis
- Malignant
 - Indurated, fixed
 - Variety of Sarcomas

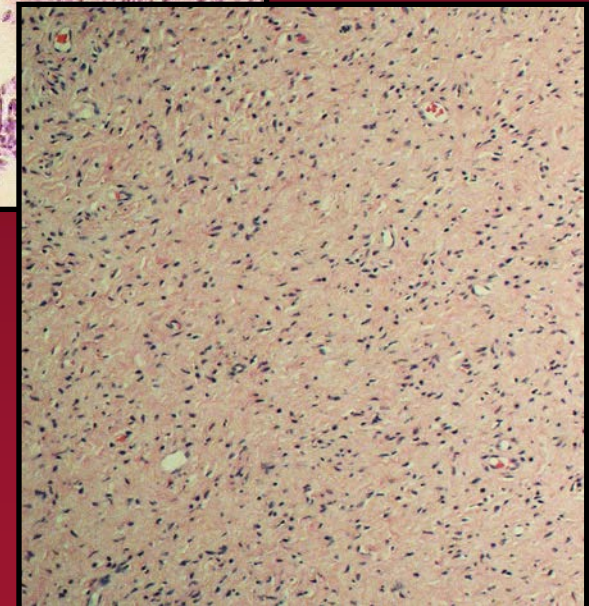
Benign Nerve Sheath Tumor

Clinical, Neurofibroma
vonRecklinghausen
Neurofibromatosis

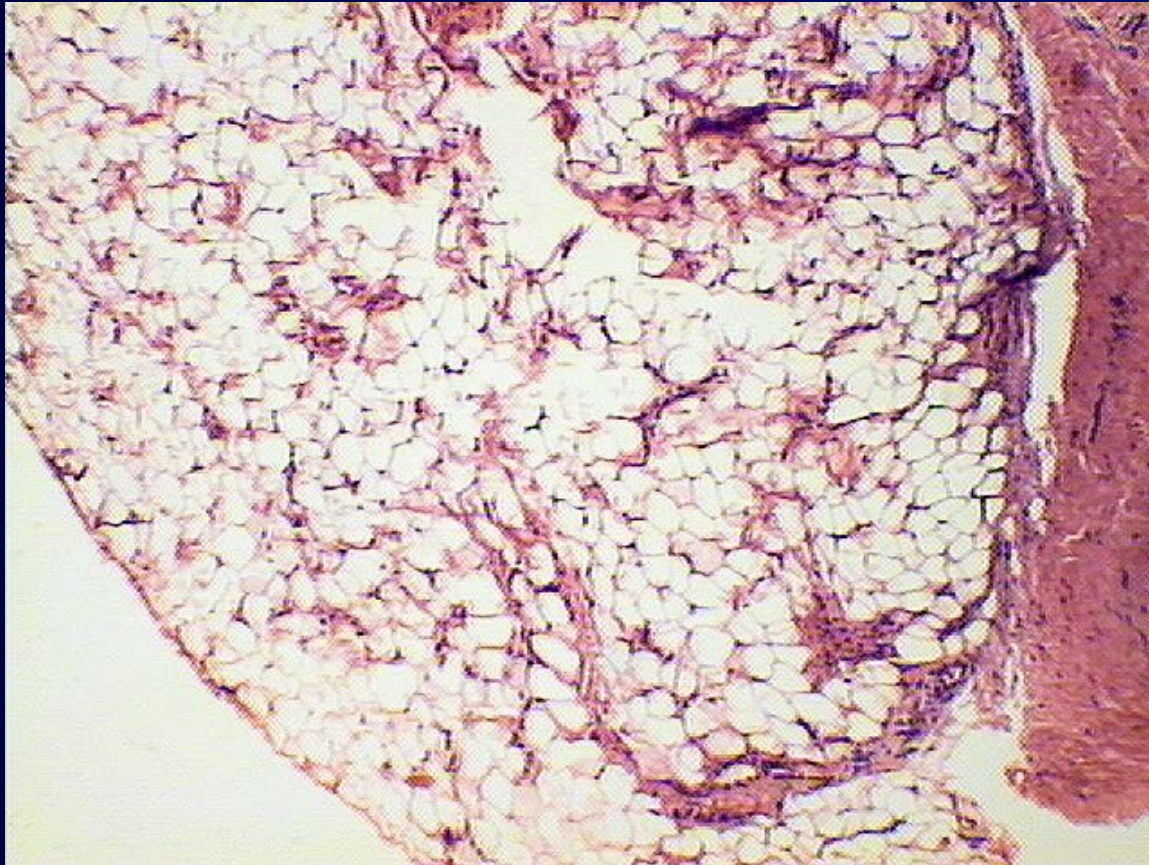
Neurilemmoma



Neurofibroma



Lipoma

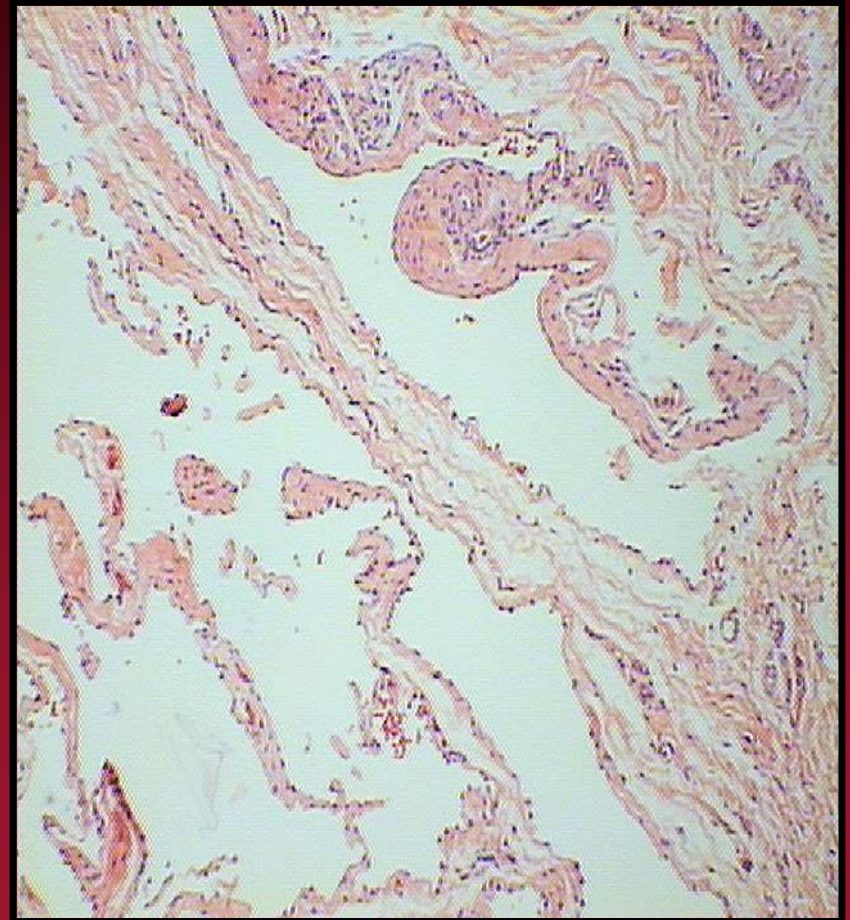


Cystic Hygroma (Lymphangioma)

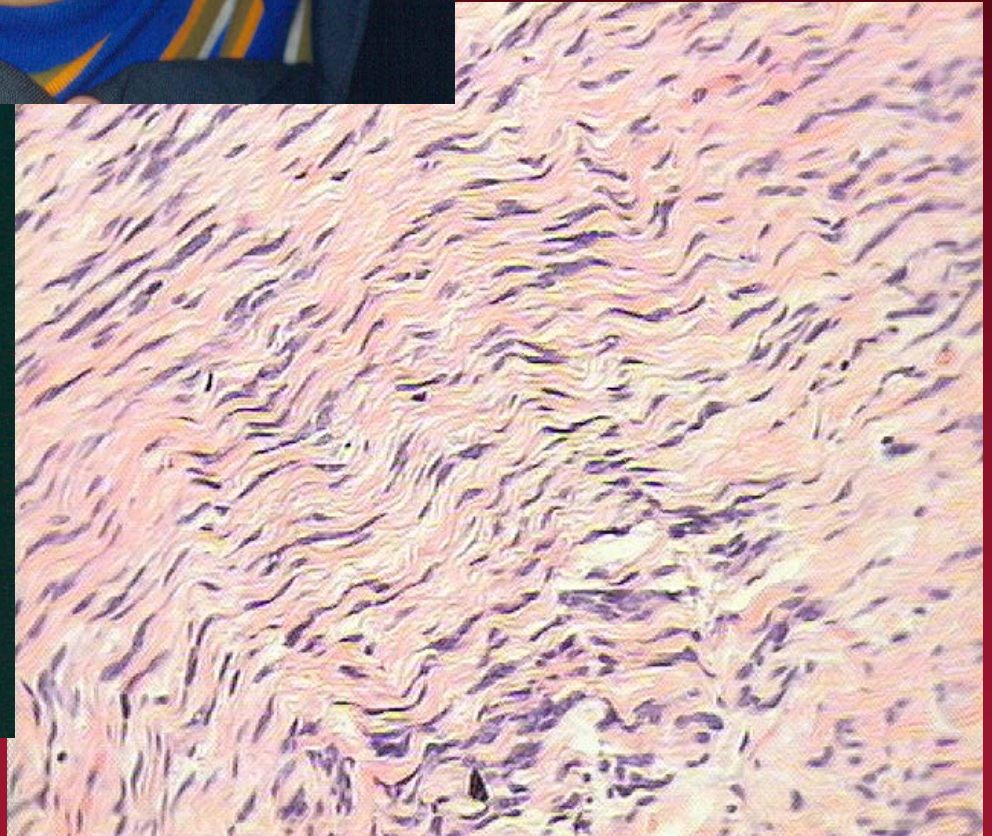
Clinical



Histopathology



Aggressive Fibromatosis

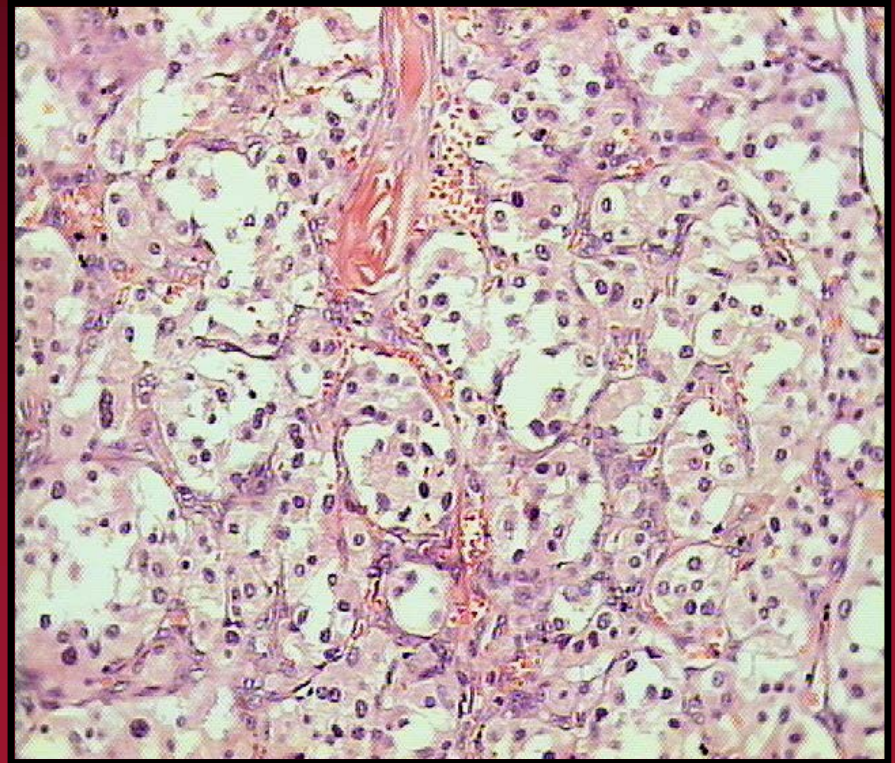


Carotid Body Tumors

- Most are benign
- Carotid furcation
- Movable laterally
- Nonmovable superoinferiorly

Carotid Body Tumor

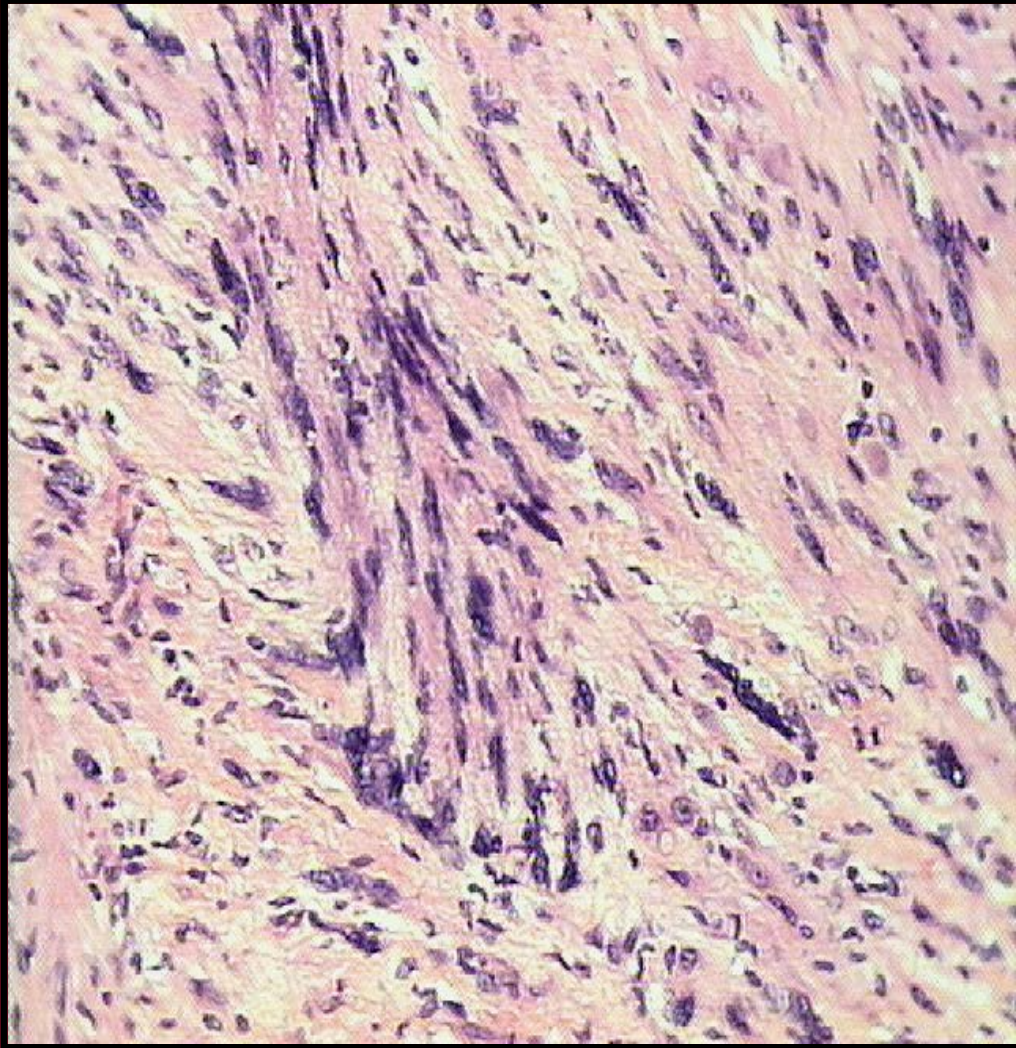
Histopathology



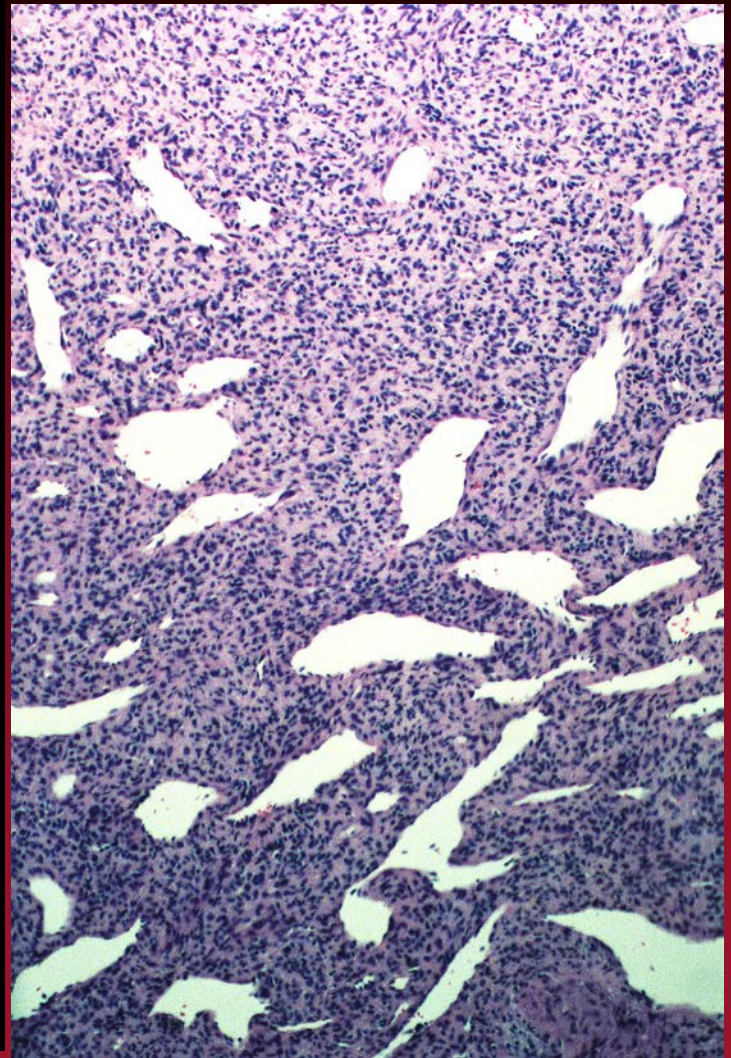
Sarcomas

- Arise from deep soft tissues, rather than from subcutaneous tissues as a rule
- Sarcomas of the head and neck are rare
- All varieties have been encountered in the neck:
 - Neurosarcoma, fibrosarcoma, myofibrosarcoma, rhabdomyosarcoma, liposarcoma, synovial sarcoma, etc.
- Tx: wide excision, some with XRT, Chemo

Sarcomas



Neurosarcoma



Hemangiopericytoma

Malignant Lymphoma

- Adults, Elderly
- Fixed, Indurated node(s)
- Hodgkin Lymphoma
- NonHodgkin Lymphoma
- Prognosis: Hodgkin > NonHodgkin
- Clinical Stages
 - I – one node group
 - II – more than one node group
 - III – both sides of diaphragm
 - IV – extranodal spread

Hodgkin Lymphoma

- Young Adult Males
- Histopathologic Classification by worsening prognosis:
 - Lymphocyte Predominance
 - Nodular Sclerosis
 - Mixed Cellularity
 - Lymphocytic Depletion

NonHodgkin Lymphoma

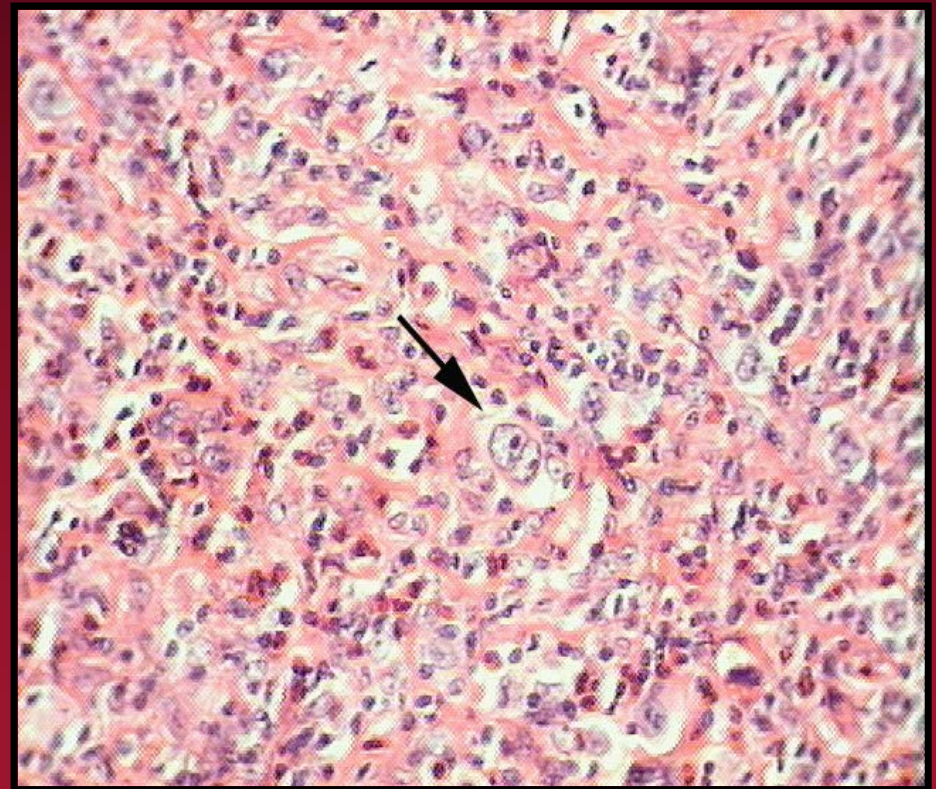
- Older Adults
- Histopathologic Pattern
 - Prognosis: Follicular>Diffuse
- Classification (cell size + pattern)
 - Low Grade: small cells, follicular
 - Intermediate Grade: larger cells, diffuse
 - High Grade: large cells, diffuse
 - Burkitt type

Hodgkin Lymphoma

Clinical



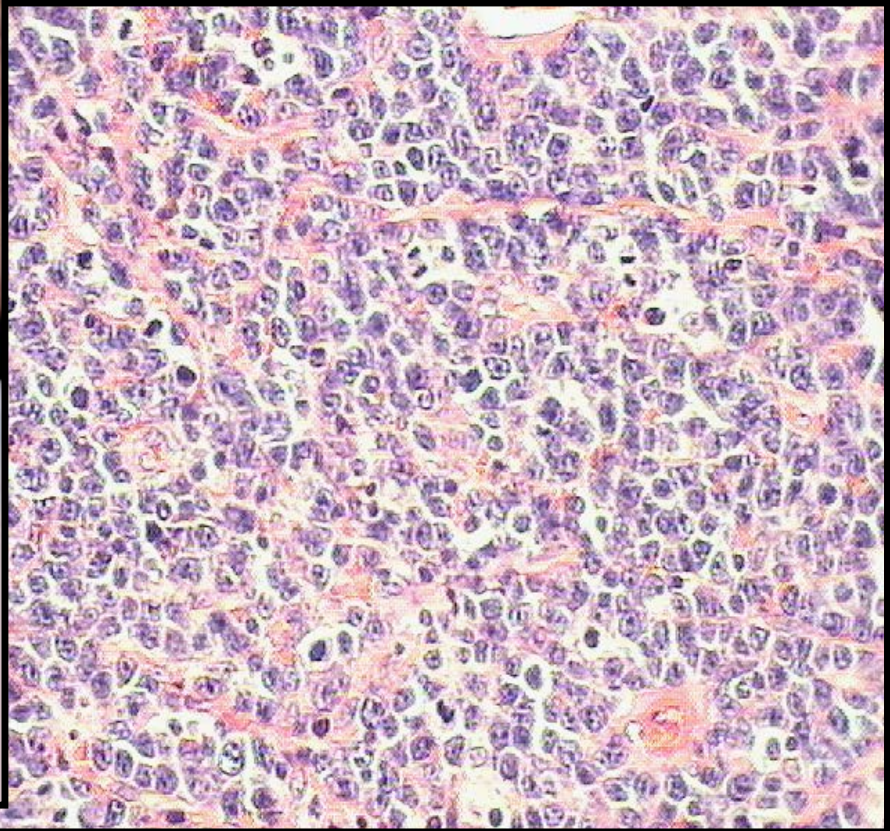
Reed-Sternberg Cells



NonHodgkin Lymphoma



Diffuse, Intermediate cells

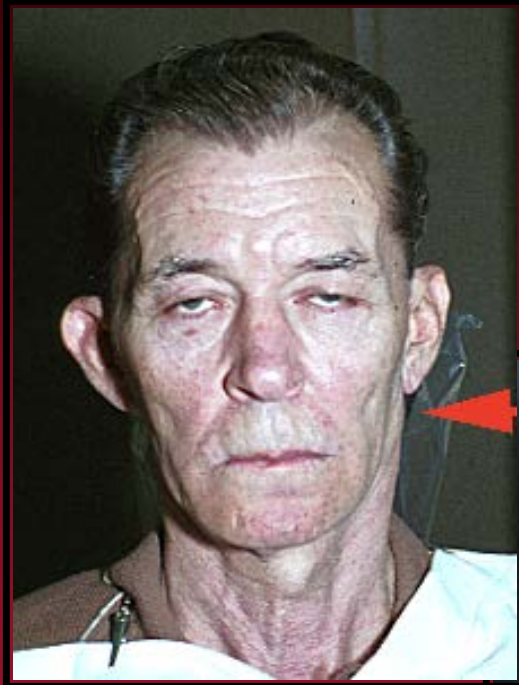


Metastatic Carcinoma

- Primary anywhere in the head & neck
- Squamous Cell Carcinoma
- Salivary Adenocarcinoma
- Indurated, Fixed
- The Unknown Primary
 - Fine Needle Aspiration
 - Usually in the Nasopharynx

Metastatic Carcinoma

Clinical



Squamous Cell CA

