# KIAS

## Anterior Cervical Cystic Lymphangioma in an Adult Patient

## Linfangioma Cístico Cervical Anterior no Adulto

**Keywords:** Head and Neck Neoplasms; Lymphangioma, Cystic **Palavras-chave:** Linfangioma Quístico; Neoplasias de Cabeça e Pescoco

Cystic lymphangioma (CL) is a rare benign tumour, located most frequently in the posterior cervical triangle. Approximately 90% of these lesions are diagnosed before the age of two, and only a small number of cases are reported in adults. Most patients are asymptomatic, although compressive symptoms, such as dysphagia, difficulty in breathing or hoarseness may occur. Diagnosis is based on clinical findings, imaging methods and biopsy. Surgery is the treatment of choice. Diagnosis is based on clinical findings, imaging methods and biopsy.

A 50-year-old female presented with a large anterior cervical cystic mass, which we assumed to be a thyroglossal duct cyst (TDC), based on clinical and imaging findings. On objective examination, the patient presented an anterior cervical mass, mobile with swallowing and protrusion of the tongue. The cervical computed tomography (CT) revealed a large, homogeneous cystic lesion, 7.5 cm in highest diameter, centered in the anterior cervical region (Fig. 1). Up to this point of the investigation, the gathered information pointed to TDC as the likely diagnosis. The biopsy was inconclusive. Intraoperatively, the lesion we found was, surprisingly, highly suggestive of a CL, with no path being identified that could represent a thyroglossal duct (Fig. 2). The lesion was excised, and the postoperative period was uneventful. The histological examination confirmed the diagnosis. At six-month follow-up, the patient remained asymptomatic, with no evidence of recurrence. In this case, the uncommon location of the CL led to a probable preoperative

diagnosis of TDC. Therefore, although CL is a rare entity in adults, it should be included in the differential diagnosis of a neck mass, even in atypical locations.

#### PREVIOUS AWARDS AND PRESENTATIONS

This work was presented as a poster and selected for presentation at the 33.° Encontro de Cirurgia - Cirurgia Geral Gaia, in October 2023, in Vila Nova de Gaia, Porto.

#### **AUTHOR CONTRIBUTIONS**

All authors contributed equally to this manuscript.

#### PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

#### **DATA CONFIDENTIALITY**

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

#### PATIENT CONSENT

Obtained.

#### **COMPETING INTERESTS**

The authors have declared that no competing interests exist.

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Figure 1 – Cervical CT scan demonstrating a large, homogeneous cystic lesion in the anterior cervical region, 7.5 cm in in highest diameter



Figure 2 – Intra-operative identification of a lesion suggestive of cystic lymphangioma, with no path being identified that could represent a thyroglossal duct

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#### Bárbara NETO CASTRO⊠¹, Daniel MARTINS¹, David Afonso JOÃO², Susana GRAÇA¹, Manuel OLIVEIRA¹

- 1. General Surgery Department. Centro Hospitalar Vila Nova de Gaia/Espinho. Vila Nova de Gaia. Portugal.
- 2. Department of Pathology. Centro Hospitalar de Vila Nova de Gaia/Espinho. Vila Nova de Gaia. Portugal.
- ☑ Autor correspondente: Bárbara Neto Castro. barbara91castro@gmail.com

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