

Images in clinical medicine



Giant pleomorphic adenoma of the parotid gland

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Giant pleomorphic adenoma of the parotid gland

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Image in medicine

A 68-year-old patient, with an unremarkable medical history, presented with a painless swelling on the right side of her face that had been gradually increasing in size for over two decades. Upon clinical examination, the parotid mass was found to measure 10 cm by 15 cm, displaying firm consistency and mobility without any attachment to adjacent structures. Remarkably, despite its considerable size, the overlying skin appeared normal, and there were no signs of facial nerve paralysis or cervical lymphadenopathy. Subsequently, the patient underwent a CT scan (B), which revealed a heterogeneous lesion originating from the superficial lobe of the right parotid gland. Under general anesthesia (C), the patient underwent a right superficial parotidectomy with a primary focus on preserving

the facial nerve. Postoperatively (D: white arrow), the patient exhibited no complications, particularly no signs of facial palsy. Histological analysis confirmed the diagnosis of a pleomorphic adenoma of the parotid gland, devoid of any malignant characteristics. Pleomorphic adenoma (PA) stands as the most prevalent tumor affecting the parotid gland. Diagnosis is typically straightforward, relying on clinical evaluation and radiological findings, particularly through magnetic

resonance imaging (MRI) scans. It is important to note that surgical intervention carries the risk of potential facial paralysis, a phenomenon extensively documented in the existing medical literature. Furthermore, PA poses a risk of malignant transformation following prolonged development. Thus, early detection and intervention are imperative in order to prevent the formation of such extensive masses and the potential for malignancy.

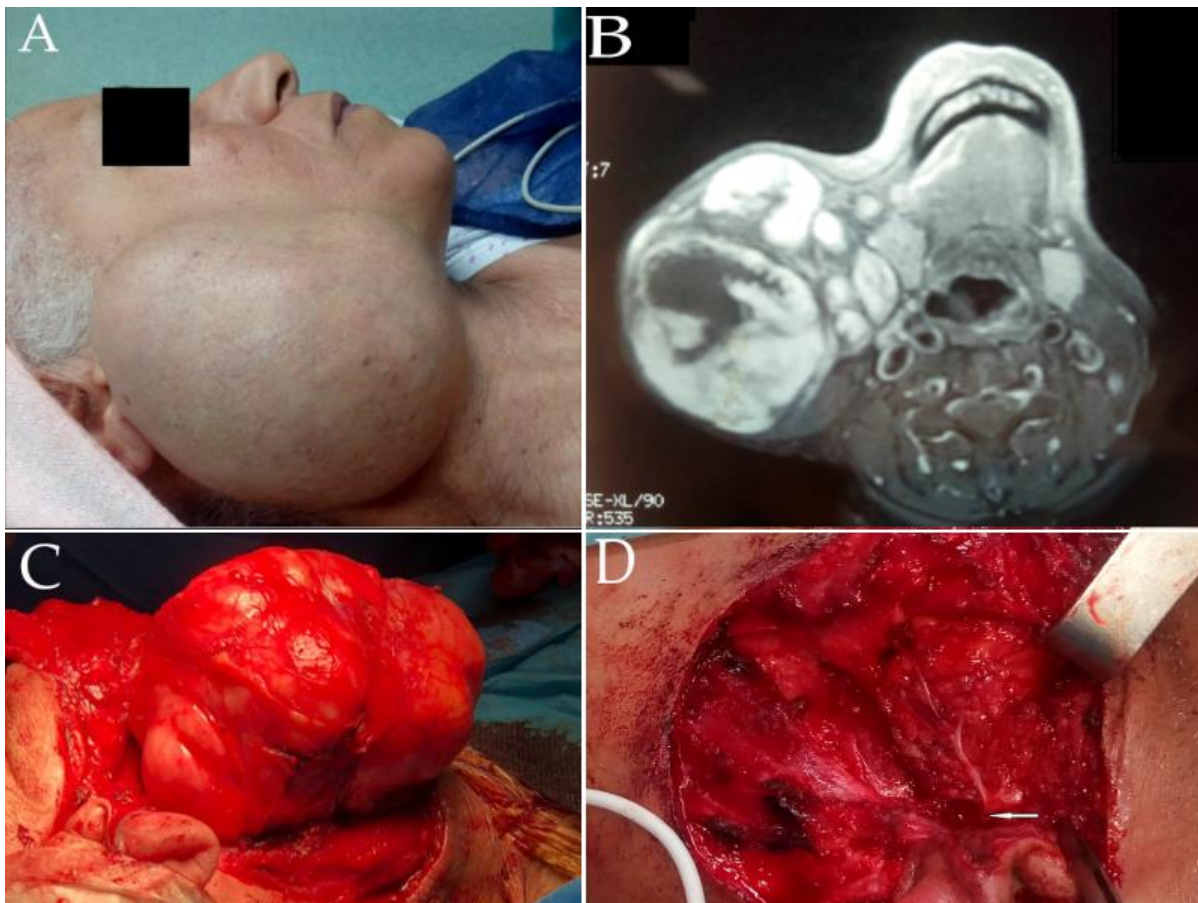


Figure 1: (A, B, C, D) surgery of a giant tumor of the parotid