

Images in Oral and Maxillofacial Surgery Camilo Mosquera, DDS, *Editor* 

## | Giant Parotid Pleomorphic Adenoma

Valentyn H. Demidov<sup>a,</sup> & Vasyl A. Rybak<sup>b</sup>

A 49-year-old woman was referred to the maxillofacial surgery center with a gigantic mass (Panels A, arrow) in the right parotid area. Patient noticed mass's appearance 3 years ago with painless rapid growth during last year. No loss of function of the facial muscles was noted. No pathologic lymph nodes were also noted clinically and on the multi-slice computed tomography (MSCT), which revealed a large mass with lobulated borders in the right parotid area, displacing masseter muscle and upper portion of the sternocleidomastoid muscle. Pre- (Panels B and D) and post-contrast (Panels C and E) MSCT was performed according to the radiological protocol. Axial scans of the contrast-enhanced MSCT (Panels C and E) clearly demonstrate the polymorphic structure of the mass helping establishing the diagnosis of parotid pleomorphic adenoma.

Pleomorphic adenoma is a benign encapsulated tumor with a cellular polymorphism due to which this tumor is also named as a "mixed tumor." Very often these tumors have incomplete/'not true' capsule with a finger-like extensions into the glandular tissue. This anatomical feature requires from the surgeons to avoid a tumor's enucleation and perform the partial/total resection of the surrounding parotid tissue (parotidectomy)



together with a mass. In cases of intratumoral localization of some branches of a facial nerve, the partial/total facial nerve sacrifice is indicated.

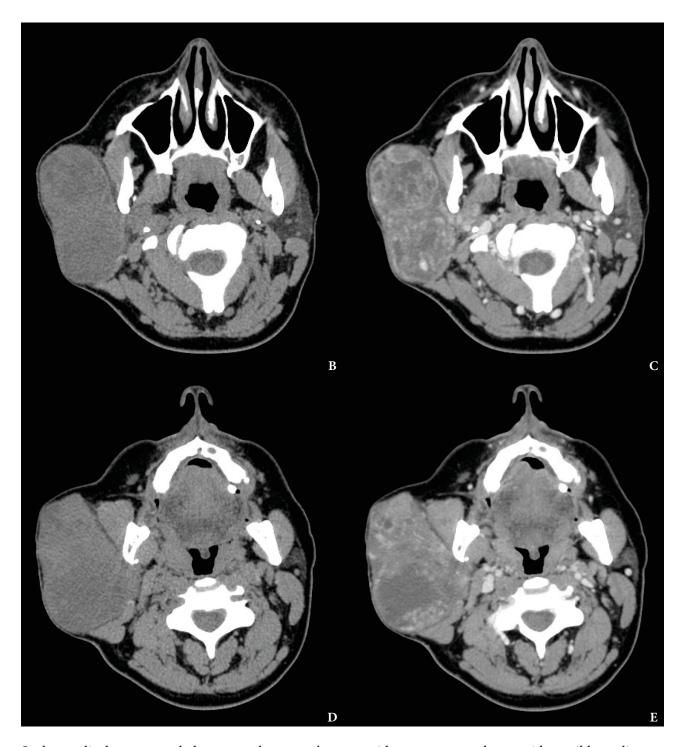
How to cite this article: Demidov VH, Rybak VA. Giant parotid pleomorphic adenoma. *J Diagn Treat Oral Maxillofac Pathol* 2020;4(3):62–3.

Paper received 12 January 2020 Accepted 10 February 2020 Available online 31 March 2020

https://dx.doi.org/10.23999/j.dtomp.2020.3.4.
© 2020 OMF Publishing, LLC. This is an open access article under the CC BY license (http://creativecommons.org/licenses/by-nc/4.0/).

<sup>&</sup>lt;sup>a</sup> Oral Surgeon, Center of Maxillofacial Surgery and Dentistry, Kyiv Regional Clinical Hospital, Kyiv, Ukraine valentyn.demidov@ukr.net

bPhD, Oral Surgeon; Head, Center of Maxillofacial Surgery and Dentistry, Kyiv Regional Clinical Hospital, Kyiv, Ukraine (position at moment of material collection) rybak.jaws@gmail.com



Such a radical treatment helps to reach two tasks: to avoid recurrence and to avoid possible malignant transformation of the recurrent pleomorphic adenoma.

The gigantic mass was removed under general anesthesia simultaneously performing right total parotidectomy with facial nerve preservation. The histopathology report proved the preoperative diagnosis.

The reported case supports the world statistics of this type of tumors: female predilection, most commonly occur in the parotid glands, mostly in its superficial lobe. 

DTJournal

J DIAGN TREAT ORAL MAXILLOFAC PATHOL 2020; 4(3):62–3