Simultaneous occurrence of a rare lymphoepithelial cyst and squamous cell carcinoma in the oral cavity

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INTRODUCTION

Lymphoepithelial cysts are rare in the oral cavity. Located mainly on the mouth floor. Contrary to that, the epidermoid carcinoma is a relatively uncommon malignant neoplasia in the oral cavity, which diagnosis is usually made at advanced stages. Scarce reports mention the coexistence of these lesions with entities such as the epidermoid cyst and geographic tongue. Nonetheless, so far, the simultaneous occurrence of both lesions has not been reported in the oral cavity. Thus, the goal of the present study was to report on an interesting and extremely uncommon case of these lesions in adjacent anatomical sites.

CASE PRESENTATION

A male, 71-year old patient was referred to us because of a painless introral lesion, perceived 6 months ago, with a granulomatous and ulcerated surface, firm to the touch, approximate size of 2 cm and located in the anterior region of the mouth floor. Upon oral examination, we noticed another yellowish papular lesion measuring about 3 mm; thus, the diagnostic hypotheses were of epidermoid carcinoma and granular cell tumor, respectively. We biopsied the lesion suggestive of malignant neoplasia and excised the other. After the pathology exam, the diagnosis was of epidermoid carcinoma (a malignant neoplasia characterized by proliferation invading the underlying connective tissue, with the cells showing cellular and nuclear polymorphism, and also cell hyperchromatism and mitotic figures) and lymphoepithelial cyst (a pathological cavity coated by keratinized stratified squamous epithelium, showing a lymphoid center in the juxta-epithelial, respectively (Fig. 1), the patient was then referred to oncologic treatment, and today the patient is without significant changes.

DISCUSSION

The lymphoepithelial cyst is a benign, very uncommon lesion in the oral cavity. When intraoral, it affects mainly the mouth floor (65.5%), followed by the posterior region of the tongue (13.7%). Nonetheless, in the present case, the lesion involved the tongue belly. Its development happens on the oral lymphoid tissue normally surrounded by areas of keratin from the coating epithelium. Its etiology is still not well described in the literature, local trauma is one hypothesis, although our patient did not report it. The epidermoid carcinoma represents about 95% of the malignant lesions which affect the oral cavity with associated etiology, especially smoking and alcoholism, these data corroborate the present paper.

REFERENCES