

Images in medicine

Cystic lymphangioma in a 44-year-old woman



Moncef Sellami^{1,8}, Abdelmonem Ghorbel¹

¹Department of Otorhinolaryngology-Head and Neck Surgery, Habib Bourguiba University Hospital, Sfax, Tunisia

[®]Corresponding author: Moncef Sellami, Department of Otorhinolaryngology-Head and Neck Surgery, Habib Bourguiba University Hospital, Sfax, Tunisia

Key words: Cystic lymphangioma, head and neck, surgical treatment

Received: 05/01/2017 - Accepted: 16/01/2017 - Published: 23/01/2017

Pan African Medical Journal. 2017; 26:33 doi:10.11604/pamj.2017.26.33.11579

This article is available online at: http://www.panafrican-med-journal.com/content/article/26/33/full/

© Moncef Sellami et al. The Pan African Medical Journal - ISSN 1937-8688. This is an Open Access article distributed under the terms of the Creative Commons Attribution License (http://creativecommons.org/licenses/by/2.0), which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.

Image in medicine

Cystic lymphangioma is a congenital malformation of the lymphatic system. This condition is usually observed among children and very rarely among adults. The aetiology in adults is likely due to delayed proliferation of cell rests due to physical injury or infection. Clinically, cystic lymphangioma is asymptomatic in adults. Treatment is generally surgical, although other methods, such as aspiration, radiation and sclerotherapy have been used. We report a case of a 44-year-old woman presented with one-year history of slowly enlarging cervical swelling at the right side of the neck. The patient had no medical problems or history of trauma to the neck. Examination showed a 4 cm smooth, soft swelling of right supraclavicular fossa. Moreover, there was no erythema or tenderness on palpation. The general examination revealed normal findings. Computed tomography (CT) showed a supraclavicular cystlike structure of 5×3×3 cm. The patient was operated through an external approach and a complete cyst excision was achieved

without complications. Histopathological examination was consistent with the diagnosis of cystic lymphangioma. The patient made an uneventful recovery with no recurrence noted one year after the surgery.

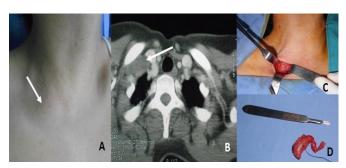


Figure 1: A) right supraclavicular mass on examination (arrow); (B) CT scan of the neck, showing a well-defined supraclavicular cystic mass (arrow); (C) Intra-operatively the mass appeared fluid filled and lobulated; (D) Excision of the cystic mass

