Case Report

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Oral teratoma-the devil's curse: a case report

I. C. Singhvi, Jayadatta G. Pawar*

Department of General Surgery, Navodaya Medical College, Raichur, Karnataka, India

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*Correspondence:
Dr. Jayadatta G. Pawar,
E-mail: drjayadatt@gmail.com

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ABSTRACT

Teratomas are true neoplasms originating from pluripotent cells and are composed of tissues from all three germinal layers, usually benign in nature. The most common sites are the sacrococcyx, anterior mediastinum, testicle, ovary, or retroperitoneum. Teratomas of head and neck are exceedingly rare and only about 10% of teratomas are found in this area. Nasopharynx and cervical region are the most common sites. We describe a one-day old female neonate with a large oral teratoma originating from the tongue which was successfully treated with surgery.

Keywords: Adenocarcinoma, Colorectal, Carcinoma, Colonoscopy, Pluripotent, Recurrence, Retrospective, Teratoma

INTRODUCTION

The word 'teratoma' was derived from greek 'tera', meaning "monster," and -oma, a suffix denoting a tumor or neoplasm. Teratoma was defined by Weaver et al. as a tumour consisting of multiple tissues that are not indigenous to their site of origin. Teratomas are multipotential tumors that are believed to arise from totipotent or pluripotential cells. They include components derived from all three embryonic layers: ectoderm, endoderm, and mesoderm. These tumors are often benign and those arising from oral cavity may result in morbidity and mortality due to their virtue of the location resulting in airway obstruction and respiratory distress.

CASE REPORT

A 3.6 kg female neonate born at 38 weeks gestation by vaginal delivery to a 26-years-old mother who had irregular antenatal examinations during pregnancy and obstetric history was found to be unremarkable. Apgar score of the newborn was normal. The baby presented

with a huge swelling over dorsal surface of tongue protruding out of the oral cavity. On examination, revealed a mass measuring 23X44X14cms (Limca book of records), pedicled, firm in consistency, arising from the left border of dorsal surface of the tongue attached with a stalk. The mass is covered by mature skin with some overlying coarse hair. There was mild respiratory distress with difficulty in feeding.



Figure 1: Clinical picture.

A clinical diagnosis of teratoma was made and excisional biopsy was planned. Under general anaesthesia, the mass was ligated and excised and other remnants were removed. Hemostasis was achieved, feeding was started subsequent day. The surgical specimen measuring 23X44X14cms containing caseous material and hair was sent for histopathological examination. The report revealed benign tumour with cyst wall lined by stratified squamous epithelium and skin adnexa. The cyst wall is composed of fibrofatty tissue with presence of an island of cartilage, giving an impression of benign cystic teratoma (dermoid cyst). No evidence of malignancy was noted. Patient was followed up upto three years and there was no recurrence.



Figure 2: Intra operative.



Figure 3: Follow-up.

DISCUSSION

Teratomas may arise from different sites of the body, the most common site in the newborn is the sacrococcygeal region about 40% of the total cases. Less than 5% occur in the head and neck.³ Teratomas are made up of all three germ layers namely ectoderm, mesoderm and endoderm. Histologically they are classified as mature, immature and malignant.⁴⁻⁶

The aetiology is due to abnormal differentiation of fetal germ cells that arise from the fetal yolk sac. Normal migration of these germ cells may cause gonadal tumors, whereas abnormal migration produces extragonadal tumor.⁷

The teratoma may be diagnosed antenatally on ultrasound, which permits early multidisciplinary management. But patients from rural India (like in our case) are devoid of multidisciplinary treatment or either ignorant of repeated prenatal ultrasound examinations. It is always associated with polyhydramnios. Total Resection is the treatment of choice, as there may be a small chance of malignant transformation in due course of time and also there is difficulty in feeding and breathing. Pure oral teratomas are rare and reported very less in literature. In our case, the patient was followed up for three years and there was no recurrence and it is a rare case of such huge oral teratoma and also its been recorded in Limca book of world records (2003).

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