

CASE REPORT

Oro-facial swelling: ultrasonographic aid in the diagnosis

Deepak Sundriyal^{1,*}, Satish Bansal², and Jayesh Khivasara³
¹Department of Medical Oncology, Dharamshila Hospital & Research Centre, New Delhi, India, ²Department of Radiology, Dharamshila Hospital & Research Centre, New Delhi, India, and ³Department of Surgical Oncology, Dharamshila Hospital & Research Centre, New Delhi, India

*Correspondence address. Department of Medical Oncology, Dharamshila Hospital & Research Centre, New Delhi, India.
E-mail: drdeepaksundriyal@gmail.com

Abstract

Oro-facial swellings are frequently encountered in clinical practice. The aim of this report is to unveil the uncommon manifestation of a common clinical problem and the help of ultrasonographic imaging in the diagnosis.

CASE REPORT

A 32-year-old male presented to us with swelling in the right cheek of 2 weeks duration. He first consulted at a primary health centre

where a malignant lesion of oral cavity was suspected. He was a tobacco chewer for the last 3 years. On examination, there was an oval, firm swelling around 2.5 × 2 cm in size, 2 cm above and medial to right angle of mandible. Examination of the oral cavity was

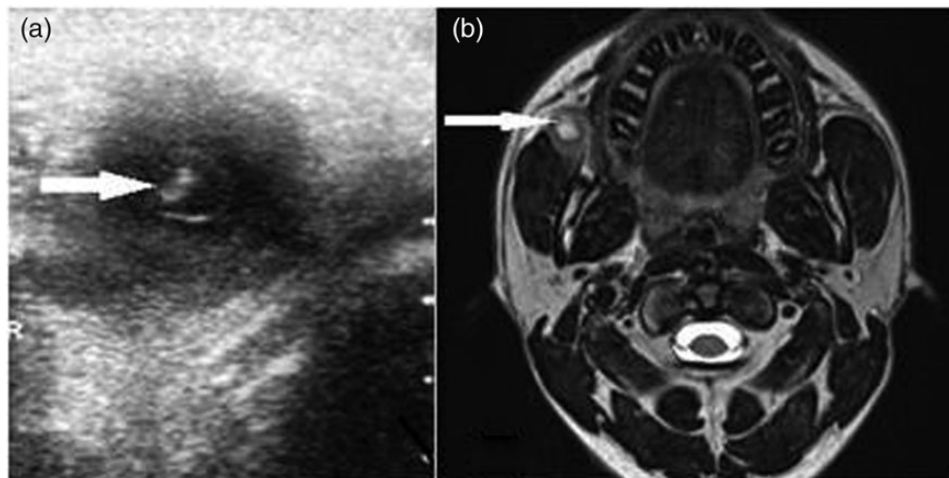


Figure 1: (a) USG image. Arrow showing an anechoic lesion with the scolex inside. (b) T₂-weighted MR image. Arrow showing a hyperintense lesion in the bucco-masseteric region.

normal. An ultrasonography of the cheek was performed which revealed anechoic cystic swelling in the bucco-masseteric region with perilesional edema. A hyperechoic intralesional structure consistent with the scolex was identified consistent with a cysticercus (Fig. 1A). MRI of the face and neck was performed. T₂-weighted image revealed a hyperintense cystic lesion with perilesional oedema in the bucco-masseteric region (Fig. 1B). FNAC of the lesion was performed and it revealed chronic inflammatory infiltrate. No evidence of malignancy was seen.

Radiographs of chest, bilateral arms and thighs were taken and MRI of the head and orbit was done. No other lesions were seen. He was advised analgesics and steroids for 7 days. The swelling reduced in due course of time. Deworming with albendazole therapy was prescribed.

This report highlights the unusual location of cysticerci in the bucco-masseteric region. Most common site of localization is nervous system [1]. Involvement of facial musculature is an extremely rare condition and the clinical diagnosis may include mucous cystic swellings, fibromas, lipomas and granulomatous lesions. USG findings of anechoic or hypoechoic lesion with or

without a hyperechoic structure within the cystic lesion suggestive of scolex are almost diagnostic of cysticercosis [2, 3].

CONCLUSION

Differential diagnosis of oro-facial swellings should include cysticercosis in an endemic country like India.

USG is an excellent non-invasive and cost-effective modality for the diagnosis.

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