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Case Study
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AN ATYPICAL CASE OF METASTATIC SQUAMOUS CELL CARCINOMA IN A YOUNG FEMALE

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ABSTRACT

Squamous cell carcinoma (SCC) of the oral tongue in patients less than 40 years old is a rare condition. Several systematic reviews in Oncology have revealed that the number of individuals under the age of 40-years with squamous cell carcinoma of the tongue is relatively rare. We report a case of oral squamous of the tongue in a 40-year-old female with complete coverage of clinical features, investigations and treatment. The clinical and radiographic features as well as the histopathological features of this case are discussed in detail. The prognosis of patients with advanced oral squamous cell carcinoma of the tongue is poor. Tumor invasion across the midline, cervical lymphatic metastasis, surgical treatment, recurrence and residual tumor are independent factors affecting the prognosis.

CASE REPORT

A 36 year old female patient reported to the Navodaya hospital with complains of ulcer on the left side of tongue since three months, associated with pain in the left side of the tongue since one month radiating to the left ear and temporal region.

The ulcer on the tongue began three months ago, it was of small size initially, within 3 months progressed to the present size.

Initially the ulcer was asymptomatic but since last 1month intermittent episodes of moderate pain was present; the episodes of pain triggered after chewing food.

The patient also had difficulty in speaking and chewing food since past 1 month. The discomfort is severe when hard food was consumed.

Patient also gave complains of bleeding from the ulcer on some occasions.

There is Difficulty in protrusion of tongue.

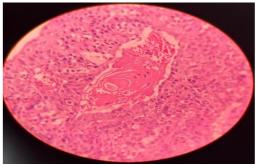
There is no history of trauma or similar complaints in the past.

Patient has no associated comorbidities.

Patient had the habit of chewing tobacco for past 15 years.







GENERAL PHYSICAL EXAMINATION:

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Patient was well oriented to time place and person;

Her height = 162cm, weight = 58kgs; BMl= 22.1

Her vital signs were within the normal range.

Pallor was present.

Lymph nodes were palpable, level lb on the right side and level lb, II, V on the left side.

LOCAL EXAMINATION

There was an ulcer over left lateral dorsum of tongue with dimensions as $5 \text{ cm} \times 3 \text{ cm}$, irregular in shape with raised borders and uneven surface containing slough. Extended 2cm proximal to the tip of the tongue by the tumor and posteriorly the base of tongue and Floor of mouth was free of invasion. Tender and indurated on palpation.

X ray AP view of Neck and chest essentially showed no bone invasion or lung infiltrates.

Haematological reports showed mild anemia

An excisional biopsy of the lesion followed by histopathological evaluation confirmed the diagnosis of carcinoma.

Tongue tissue showing Lining of stratified squamous epithelium with the presence 0f moderate pleomorphism having increased nuclear-cytoplasmic ratio. Also noted are well formed keratin pearls at focal areas. Few intervening proliferating blood vessels are noted. 3-4 mitotic figures/10HPF are noted.

Imp: Features are suggestive of moderately differentiated SCC-Keratinizing type.

Treatment: Wide local excision of the lesion with lymph node dissection was done with post adjuvant chemotherapy.

Patient is being followed up every 3months for 2 years.

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