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Case studies

Ulcerated Giant Lipoma over Nape of Neck – A Rare Case

Abstract - Lipoma is benign tumor. Lipoma composed of fat cells of adult type. Lipoma called as universal tumor as it can occur anywhere in body. Lipoma with size of more than 10 cm in one dimension or weighing a minimum of 1000 gm. called as giant lipoma [1]. Surgical excision is the treatment of choice for lipoma. We report a case of giant lipoma (4.5 kg.) With decubitus ulcer over nape of neck which is rare entity.

Keywords – Benign tumor, Giant lipoma, Lipoma, Tumor, Universal tumor.

Introduction – lipoma is a common benign tumor. The annual incidence of lipoma is one per 1,000 persons. Lipomas are generally slow-growing tumor with a firm rubbery consistency. While about 80% of lipomas are less than 5 cm in diameter, some can reach more than 20 cm and weigh several kilograms. Usually lipomas are asymptomatic but can cause pain when they compress nerves. Solitary lesions are seen about 80% of the time, commonly in women, while multiple lesions are most common in young men [2]. Lipoma is seen in all age group though most commonly seen in fifth and sixth decade [3]. It constitutes five percent of all benign tumors of body and can be found anywhere in the body [4]. Lipoma in head and neck region is not commonly encountered (13%). The first case of lipoma in the neck region was reported over 100 years ago [5]. Amongst the head and neck lipomas, commonest location is posterior neck [6].

Case report – We report a case of ulcerated giant lipoma size 15x15 cm, 4.5 kg.weigh, over nape of neck in 60 year old patient. A 60 year old male patient came in outdoor with chief complaint of swelling over nape of neck since 12 years. Initially swelling was small in size, with time swelling was increasing in size gradually. Patient has difficulty during sleeping in supine position and difficulty in neck movement. Since three years he got developed ulcer over summit of swelling. This ulcerated lesion made suspicious diagnosis of malignancy. Cosmetically he felt guilty due to the swelling. Swelling was globular, firm in consistency, freely mobile over base, ulcer over summit with slough. There were visible dilated veins over swelling. Due to weigh swelling was hanging down and giving appearance like pedunclated swelling.

Fine needle aspiration cytology report of swelling was showing fat cells. CT scan report revealed that mass was well defined and present in sub-cutaneous plane. There was no communication with spinal cord. Other hematological investigations were with in normal limit. Patient was operated in plan OT under general anaesthesia and lipoma was excised with ulcer after giving elliptical incision. Wound closed after placing a drain. Drain was removed on third post-operative day. Patient discharge without any complication on eight post-operative days. Histopathology of biopsy report revealed as lipoma without any evidence of malignancy.

Discussion - A lipoma is a benign tumor composed of adipose tissue (body fat). It is the most common benign form of soft tissue tumor [7]. According to WHO classification of soft tumors these can be classified into nine groups, including lipoma, lipomatosis, lipoblastoma, angiolipoma, myolipoma of soft tissues, chondroid lipoma, spindle cell lipoma, and finally hibernoma and pleomorphic lipoma [8]. Lipomas are tumors with unexplained pathogenesis and etiology. Hereditary factors have been reported in conditions such as familiar multiple lipomatosis [9]. Giant lipomas are defined by Sanchez et al as lesions with size of at least 10 cm in one dimension or weighing a minimum of 1,000 gm. [1]. After long time lipoma may undergo myxomatous degeneration, saponification, calcification, infection, ulceration due to repeated trauma and malignant transformation. Rarely malignant transformation of lipoma into liposarcoma has been described [10, 11]. Most of the lipomas are small but some

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lipomas are huge in size that they resemble like malignant swelling. Ulcerated huge lipoma swelling with bleeding arouse suspect of malignancy [12]. FNAC, USG, CT scan and MRI are useful diagnostic tool for final diagnosis.

Conclusion – lipoma is a common benign tumor. Huge lipoma with ulcer over summit over nape of neck is not common entity. Such type of swelling resemble like malignancy. So, this type of swelling should be operated after proper diagnosis. Surgical excision is the treatment of choice for lipoma.

Fig -1: Showing giant ulcerated swelling.

Fig -2: Showing visible dilated vein.

Fig – 3: Excised giant lipoma skin side view.

Fig - 4: Excised giant lipoma internal view.

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