Vallecular Cyst: Often A Diagnosis – Case Report

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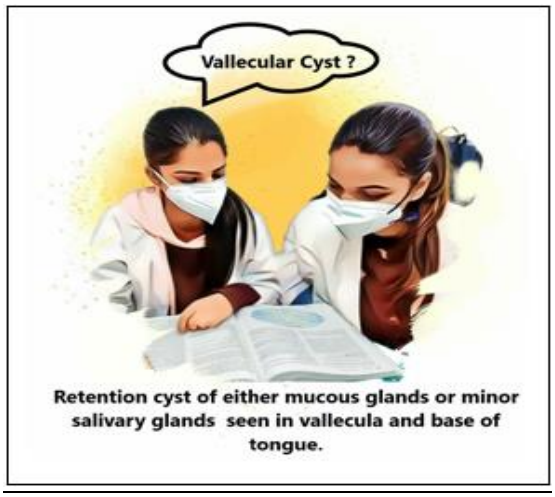
INTRODUCTION

Vallecular cysts are rare retention cysts of either mucous glands or minor salivary glands seen in the vallecula and base of tongue [1]. Distortion of epiglottis is observed when the cysts grow larger in size [2]. Vallecular cyst is a rare benign lesion in an adult which is seen arising from lingual surface of epiglottis [3]. Herein, we report a case of vallecular cyst in an adult, which has been treated surgically.



Retention cyst of either mucous glands or minor salivary glands seen in vallecula and base of tongue.

CASE REPORT

45-year Hypertensive male, presented in OPD with complain of Difficulty in swallowing, pain in throat and recurrent throat clearing for 5 months. No history of weight loss, change in voice, foreign body sensation in throat, retrosternal burning, difficulty in breathing. On oral cavity examination, movements of tongue were normal and further examination was found to be normal.

On videolaryngoscopy, a smooth circumscribed swelling with definite margins was seen in left vallecula extending from base of tongue to lingual surface of epiglottis and median glossoepiglottic fold.

Further, Marsupialization was planned and done, while marsupialsing the first cyst another cyst was seen behind it. Growth was sent for histopathological examination and revealed mucus retention cyst. Post operatively patient was symptom free and was discharged on the fifth post operative day. Patient was on regular follow up and there is no recurrence after 3 months post op.

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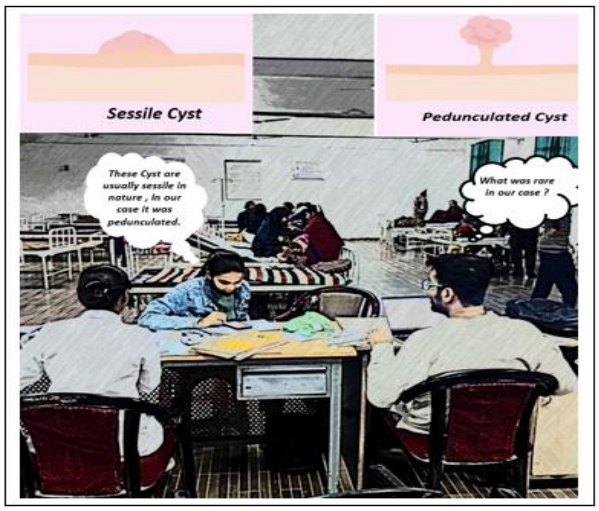
On Microscopy, the section showed Cystic Space which is lined by focally hyperplastic stratified squamous epithelium. Contains lymphocytes, plasma cells, neutrophils and eosinophils along with an areas of haemorrhage.

DISCUSSION:

Vallecular cysts, also called epiglottic mucus retention cysts or base of tongue cysts, arise when the duct of a mucous gland or lingual tonsillar crypt becomes obstructed and dilates [4].These cysts have therefore been classified as ductal cysts, retention cysts, and lymphoepithelial cysts and are caused by inflammation, irritation, or trauma [5].Ductal cysts may occur at any location lined by mucosa and can be found at any site in the larynx other than the free edge of the true vocal cords [6]. Vallecular cysts resembling tonsillar crypts due to associated lymphoid tissue have been separately classified as lymphoepithelial cysts and may also occur in the aryepiglottic fold, vestibule, and piriform sinus [6]. Nearly two-thirds of vallecular cysts are asymptomatic and are diagnosed incidentally on routine laryngeal examination [6]. The incidence of vallecular cysts on laryngoscopy has been reported as 1 in 1,250 to 1 in 4,200, but the true incidence is difficult to estimate [7]. Vallecular cyst is a unilocular cystic mass of variable size arising from the lingual surface of the epiglottis, containing clear and noninfected fluid [8]. Vallecular cysts are confirmed by laryngoscopic examination [2].

CONCLUSION:

In adults, vallecular cysts are most often asymptomatic and discovered on routine laryngoscopy or during induction of anesthesia. It should be considered as a differential diagnosis when patient presents with dysphagia. Marsupialization is treatment of choice for Vallecular cyst. As this cyst was pedunculated so excision was planned.



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