

## Tongue Lipoma: Rare Location for a Tumor

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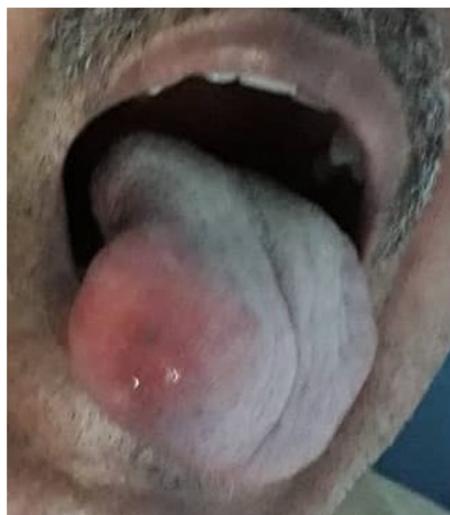
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Epithelial tumors have predominance in the tongue but it is an uncommon location for lipoma, tumor of mesenchymal origin, benign, asymptomatic slow-growing, soft tissue neoplasm of mature adipocytes, that can be sessile or pediculated, single or lobed and surrounded by a thin fibrous capsule [1,2], rarely recurs after surgical treatment [2,3].

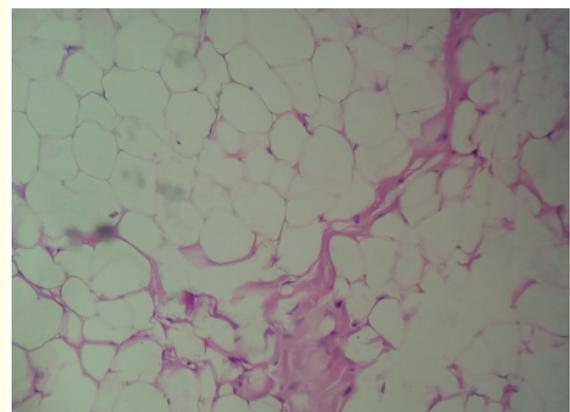
A 64-years-old Caucasian male patient is reported, who has a one-year history of swelling of the right anterolateral border of his tongue, slow growing, not associated with pain nor bleeding, that made him difficult to speech, mastication and swallowing due to tumours's dimension (Figure 1). Considering the patient's age and the time of evolution suggests worse prognosis. A wide local excision of the mass was done under general anesthesia and was carefully dissected with total excision of the tumor.



**Figure 1:** Tongue frontal view: painless tumor on the right lateral border of tongue.

Macroscopically the mass was yellowish, soft, with a fibrous capsule, well demarcated and measuring approximately 4 cm.

On microscopic examination showed mature adipose tissue with large round to oval proliferation of mature adipocytes with normochromatic eccentric nuclei with abundant clear cytoplasm, adipose lobes separated by thin fibrous septums, absence of vascular network and no mitosis, necrosis or atypies were observed, with the presence of hyaline acellular material delimiting fatty lobes (Figure 2).



**Figure 2:** Microphotograph of tongue lipoma, showing mature uniformed size adipocytes without atypia with hyperchromatic stromal cells in the fibrous connective tissue; hematoxylin and eosin stain.

The histological diagnosis was well-differentiated lipoma. Lipoma of the head and neck account for 15 - 20% of all head and neck

tumors, only 1 - 5% of them affect the oral cavity [2] and its presence in the tongue is rare account for 0.3% [4]. Although lipoma is the most common benign mesenchymal tumor, its presence on the tongue is not common. If we remember the histology of the tongue, it is totally devoid of fat cells.

The characteristics of the tumor allows establishing differential diagnoses with fibrolipoma, neurofibroma, angioliipoma, liposarcoma well-differentiated, mucoepidermoid carcinoma [5].

The most appropriate treatment is surgical excision when there are diagnostic doubts or patient discomfort to speech and swallow.

### Disclosure Statement

No potential conflict of interest was reported by the author.

### Ethical Approval

This article does not contain any new studies with human participants or animals performed by the author.

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