

### JCHS-CQ-01-2021

### **Pearly White Swelling from the Palatine Tonsil**

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### ANSWER TO JCHS-CQ-01-2021

A1: Left tonsil lymphoepithelial cyst (LEC).

A2: Depending on the size, the patient may be asymptomatic or having obstructed airway symptoms. Foreign body sensation in the throat and difficulty in swallowing are common presentations.

A3: Asymptomatic cases can be treated conservatively as it is a benign swelling. If surgery is required, complete excision will give excellent outcomes with no recurrence rate. Tonsillectomy can be done if indicated e.g. if the patient develops airway obstruction.

### **Discussion**

Lymphoepithelial cyst (LEC) is a benign cyst that is also known as a branchial cyst. Oral LEC is characterized clinically as smooth painless yellowish or white nodules. Histopathology showed squamous epithelium surrounded by abundant lymphoid tissue [1]. The occurrence at palatine tonsil is extremely rare [2]. In the head and neck region, usually, LEC can be found on the ventral or posterolateral surface of the tongue and the floor of the mouth [3, 4]. It has also been reported to occur in different parts of the body such as thyroid, mediastinum and pancreas [5,6,7]. The most widely accepted aetiopathogenesis is a pseudocyst of retention, arose from obstruction of the crypt at palatine tonsil known as Knapp's theory [8].

Symptoms can be greatly diverse, and the patient may be asymptomatic. The mass can be detected during a routine dental check-up or as the cyst increase in size, they may experience sensation of a lump in the throat [1], difficulty in swallowing [9], snoring, voice changes and airway obstruction. In our case, the patient only experienced throat discomfort. There is no other obstructive symptom possible due to the small size of the cyst. However, patient underwent tonsillectomy due to the underlying recurrent tonsillitis. Histological study of the cyst confirmed it as LEC.

Amongst differential diagnoses of a tonsillar cyst or swelling include tonsillar abscess, lymphoma and mucocele. Simple needle aspiration for cytopathology study can help to rule out the differentials. If pus is aspirated, culture and sensitivity can be obtained. Imaging such as computed tomography scan or magnetic resonance imaging should be arranged as part of the investigation if the diagnosis is uncertain [10]. Depending on the symptoms and the size of the lesion, LEC can be closely observed in the outpatient clinic visits. When surgery is required, simple excision or marsupialization can give excellent outcome with no recurrence rate reported [1]. Tonsillectomy can be done as part of the procedure if indicated. In our case, follow-up for 2 years after removal revealed no recurrence of the lesion.



## Learning Points

- Lymphoepithelial cyst (LEC) is a benign lesion.
- Symptoms of tonsil LEC may vary from asymptomatic to obstructed airway, depending on its size.
- Treatment can be watchful waiting, or surgical excision if symptomatic.

## Conflict of Interest

Authors declare none.

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