Title: Schwannoma of the Para Pharyngeal Space

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Introduction
Para pharyngeal space (PPS) tumours are mostly benign (80%). These are rare tumours of head and neck with incidence of about 0.5% [1]. Schwannomas are the most common neurogenic tumours of head and neck, second most common PPS tumours. One such classical presentation of schwannoma video presentation is given here.

Case Blog
The usual presentation of PPS tumours are with neck swelling. This patient had a classical symptom of swelling increasing in size with valsalva. The reason for this could be, most neurofibromas arise from Schwann cells and are usually subcutaneous, hence increasing in size with valsalva. One thing we have to be aware about these tumours is, they may be multiple, and may be associated with Von Recklinghausen's disease (see Video). The patient was having nasal intonation of speech that can be appreciated. Also on valsalva we can see the mass is increasing in size. FNAC reports turned out to be schwannoma. MRI scan was done. Tran's cervical approach was planned. Anticipating difficult intubation pre-operative tracheostomy was done. HPE reports turned out to be schwannoma.

Discussion
FNAC, radiology studies are mandatory for the evaluation of PPS tumours. FNAC can be USG or CT guided for a better result. CT and MRI are very essential for the pre-op planning, especially for the approach to be planned in a better way. Schwannomas have the characteristic picture of antoni A and antoni B bodies [2]. There was no pleomorphism or increased nuclear cytoplasmic ratio. The various other tumours of the PPS are pleomorphic adenoma, paraganglioma, malignancy of salivary gland, metastasis from adjacent regions.

Conclusion
Parapharyngeal space tumours have complex anatomical distribution with subtle presentation. Preoperative radiological assessment is very essential for the head and neck surgeon to know the pattern of spread and to remove the tumour completely.

References
2. Scott and brown’s otorhinolaryngology and head neck surgery volume 2 (7thedn) Hodder Arnold publication p. 2524