

## Common Benign Tumour in Oral and Oropharyngeal Lesion

Suporna Saleh<sup>1</sup>, Sharmin Haque<sup>2</sup>, Md. Mahmudul Huda<sup>3</sup>, Md. Shamim Farooq<sup>4</sup>, Tazalle Mizan<sup>5</sup>, Kazi Mazharul Islam<sup>6</sup>

<sup>1</sup>Associate Professor (c.c), Department of Pathology, Dhaka National Medical College, Dhaka

<sup>2</sup>Associate Professor (c.c), Department of Pathology, Bangladesh Medical College, Dhaka

<sup>3</sup>Professor (c.c), Department of Pathology, Dhaka National Medical College, Dhaka

<sup>4</sup>Professor (c.c), Department of Pathology, Dhaka National Medical College, Dhaka

<sup>5</sup>Senior Lecturer, Department of Pathology, Dhaka National Medical College, Dhaka

<sup>6</sup>Associate Professor (c.c), Department of Pathology, Dhaka National Medical College, Dhaka

### ABSTRACT

**Background with Objective:** The oral cavity and oropharynx are vulnerable to a limitless number of environmental insults because of its exposure to the external world. It is the site of various lesions many of which are precancerous and cancerous. The aim of this study was to assess the common types of benign tumor in oral and oropharyngeal lesion.

**Methods:** This descriptive cross-sectional study was carried out among 33 patients presenting with benign tumor in oral cavity and oropharynx at Pathology department for histopathology, Dhaka Medical College Hospital, Dhaka, from January 2016 to December 2017. Purposive sampling method was followed. Statistical analysis of the results were obtained by using window based computer software devised with Statistical Packages for Social Sciences (SPSS-20.1).

**Results:** Male patients (64%) suffering from more benign tumor in oral cavity than female patients. Most of the patients belonged to 11-20 years (39.39%). Tobacco smokings were more common addiction (18.18%) among the patients. Capillary haemangioma were more common benign tumor in oral and oro-pharyngeal lesion. Most of the Patients (79%) presented with growth/mass and 21% patients had ulceration. Only 15% patients had history of pain in tumor.

**Conclusion:** Capillary haemangioma is more common benign tumor in oral and oropharyngeal lesion.

**KEYWORDS:** Benign tumor, Oral and oropharyngeal lesion, Capillary haemangioma

### ARTICLE DETAILS

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### INTRODUCTION

The oral cavity is the first part of digestive system and there are many types of tissues like bone of mandible and maxilla, epithelial tissue of oral mucosa, minor salivary glands, and odontogenic tissue; it liable for different types of epithelial, mesenchymal and lymphoid tumours<sup>1</sup>. Oral diseases are major public health problem owing to their high prevalence and incidence in all regions of the world<sup>2</sup>. Oral cavity is prone for a myriad of changes with advancing age as well as a result of the environmental and life style related factors. Oral lesions can occur as a result of infections, local trauma or irritation, systemic diseases and excessive consumption of tobacco, betel quid and alcohol<sup>3</sup>. Benign tumours and tumour like conditions of oral cavity include eosinophilic

granuloma, fibroma, granular cell tumour, lipoma, keratoacanthoma, schwannoma, papilloma, neurofibroma, pyogenic granuloma etc, as well as odontogenic tumours<sup>4</sup>. The oral cavity is one of the most common sites for tumours and tumour-like lesions. The most frequent lesions are benign as non specific chronic inflammation, mucocele, inflammatory fibroepithelial hyperplasia, pyogenic granuloma, haemangioma, etc<sup>5</sup>. The aetiological factors implicated in oral cancer are tobacco use, alcohol consumption, chewing of betel quid and betel leaf, shada pata, gul etc. Others include diet and nutritional status, chronic candida infection, viral infection, and immune deficiency. The chewing of betel quid is very common in South-East Asia, the Indian subcontinent, including Bangladesh. The types of

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tobacco they chewed mostly are jorda and shada. This finding are similar to our national statistics, where tobacco smoking for ladies is not a custom till now and most of the females consume smokeless tobacco only. Proper management of patients with an oral lesion starts with accurate diagnosis. Among the various methods available for diagnosis of oral lesions, the histopathological examination is regarded as the Gold Standard <sup>6</sup>. An adequate incisional biopsy taken from the representative area of the lesion can provide over 98% diagnostic accuracy <sup>7</sup>.

### MATERIALS & METHOD

This descriptive cross-sectional study was carried out among 33 patients presenting with benign tumor in oral cavity and

oropharynx at Pathology department for histopathology, Dhaka Medical College Hospital, Dhaka, from January 2016 to December 2017. Purposive sampling method was followed. The collected data were entered into the computer and analyzed by using SPSS (version 20.1) to assess the common types of benign tumor in oral and oropharyngeal lesion. The study was approved by the institutional ethical committee.

### RESULTS

Male patients (64%) suffering from more benign tumor in oral cavity than female patients. Most of the patients belonged to 11-20 years (39.39%) (Table 1).

**Table 1: Socio-demographic Characteristics of the study population (n=33)**

Parameter	Number	percentage
<b>Gender</b>		
Male	21	64%
Female	12	36%
<b>Age</b>		
1-10 years	1	3%
11-20 years	13	39.39%
21-30 years	7	21.21%
31-40 years	0	0%
41-50 years	3	9%
51-60 years	8	24%
61-70 years	1	3%

Tobacco smoking were more common addiction (18.18%) among the patients.(Table 2)

**Table 2: Personal habits of the study population (n=33)**

Addiction	Number	percentage
Betel Leaf and nut with jorda/Sad/Gul	3	9%
Tobacco Smoking	6	18.18%
Alcohol consumption	0	0%
No addiction	24	73%

Capillary haemangioma were more common benign tumor in oral and oro-pharyngeal lesion.(Table 3)

**Table 3: Type of Benign Tumor in oral and oropharyngeal lesion (n=33)**

Type of benign tumor	Number	percentage
Ameloblastoma, follicular variant	5	15%
Capillary Haemangioma	16	48%
Cavernous Haemangioma	1	3%
Cementifying fibroma	2	6%
Inflamed haemangioma	1	3%

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Lymphangioma/circumscriptum	2	6%
Neurofibroma	1	3%
Pleomorphic adenoma of salivary gland	3	9%
Pseudocarcinomatous hyperplasia	1	3%
Squamous papilloma	1	3%

Table 4 shows distribution of cases regarding their nature of lesions. Most of the patients (79%) presented with

growth/mass and 21% patients had ulceration. Only 15% patients had history of pain in tumor.

**Table 4: Distribution of patients as per nature of lesions (n=33)**

parameter	Number	percentage
<b>Nature of lesion</b>		
Growth/ Mass	26	79%
Ulceration	07	21 %
<b>Clinical Symptoms</b>		
Painful	05	15%
painless	28	85%

## DISCUSSION

The diagnosis of a variety of lesions that occurring in the oral cavity and oropharyngeal region share essential part for the evaluation of the oral health of any population. Several studies on oral and oropharyngeal lesions have been done in India, Pakistan and many other regions of UK and USA, but not much yet have been done in our country. In our study male patients (64%) suffering from more benign tumor in oral cavity than female patients. Suhani Ghai and Yogesh Sharma reported that male and female patients suffering equally in oral benign tumor. In our study Most of the patients belonged to 11-20 years (39.39%)<sup>8</sup>. Similar result was obtained in the study conducted by other study. In their study they stated that less than 40 years patient suffering from more benign tumor<sup>8</sup>. Capillary haemangioma was found to be the most (48%) frequent benign tumour arising commonly from buccal mucosa. Next frequency were ameloblastoma and pleomorphic adenoma of minor salivary gland were found to be the second and third common benign tumour. Allon Irit, Kaplan Ilana et al. (2013) conducted a study about clinical characteristics of benign oral mucosal tumor. They reported that lipomatous tumor (27.4%) is more common in oral cavity followed by vascular tumor (23.3%).<sup>9</sup> Domingo, s.t., Bagan, j.v., Jimenez, y. et al. (2008) conducted a study entitled "Benign tumors of the oral mucosa: A study of 300 patients". They stated that fibroma (53%) is more common benign tumor in oral mucosa.

## CONCLUSION

Capillary haemangioma is more common benign tumor in oral and oropharyngeal lesion. The oral cavity is the place where various mucosal lesions can occur. Their occurrence

can be limited by early detection and elimination of harmful habits.

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## CONFLICT OF INTEREST

Authors declare no conflict of interest.

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