

Abstract

- Neuroendocrine neoplasm arises from neural crest cells.
- Small cell neuroendocrine carcinoma (SmCC) is a poorly differentiated neuroendocrine tumor.
- It has an aggressive natural history characterized by widespread metastasis



Fig 1 : picture of the patient after skin permeation of the left cervical adenopathies

Symptoms: -left-side neck swelling that started eight months earlier.

-an unintentional weight loss.

Physical examination (fig1): multiples left adenopathies of 10 cm indurated, fixed and painless, IIA IIB III V sectors.

Evolution: rapid increase in size and skin permeation.

Ultrasound scan: multiples heterogeneous and vascularized left sub maxillar and jugulo-carotid adenopathies

Biopsy under local anesthesia

Final histopathology:

- small round to oval tumor cells
- arranged in cords or nests
- containing hyperchromatic nuclei, scant cytoplasm
- Mitotic figures

Immunohistochemical:

- CD56,CK,Synaptophysine and Chromogranine: positive
- CD45: negative

Résultats

Therapeutic management: readmission for further investigation and treatment

Contrast-enhanced cervico-thoraco-abdomino-pelvien CT:
- 150 x 80 mm left latero-cervical masse of suspicious appearance

- Infiltrating the left parotid and submandibular glands and the homolateral sterno-cleido-mastoid muscle
- Pushes back the common and internal carotid arteries which are permeable

- It compresses the internal jugular vein.

- Hepatic metastasis

- No pulmonary metastasis or primary lesion

Bronchial fibroscopy: normal

⇒ Given the aggressive nature of this tumor and the patient's symptomatic burden, chemotherapy was initiated in the hospital

Chemotherapy: cisplatin + etoposide VP16

⇒ Passed away after only two cycles of chemotherapy.

Objectifs

- Aim of this observation:** to describe the characteristics and outcomes of a patient with neuroendocrine carcinoma of the head and neck.

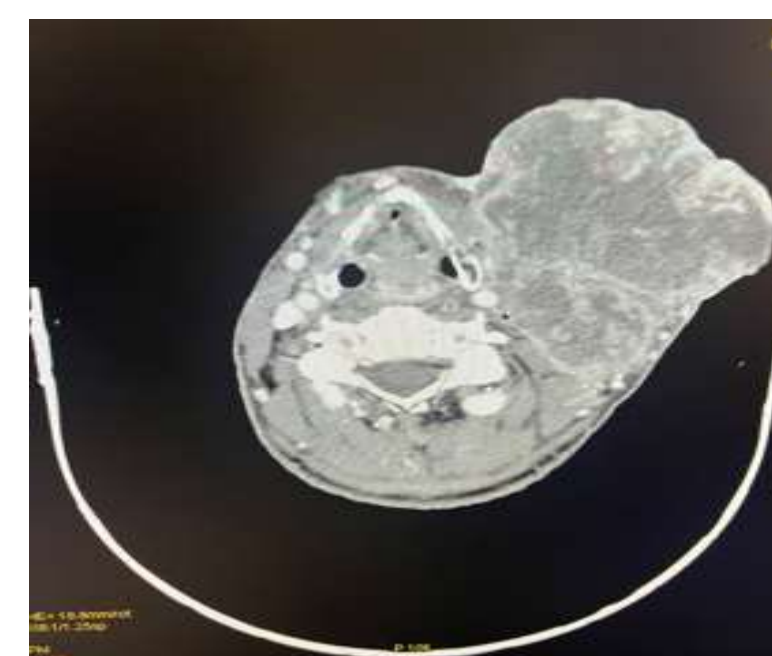


Figure 2: Axial slice of a contrast-enhanced cervical CT scan showing a large lobulated mass with heterogeneous enhancement, containing areas of necrosis ■

Small cell neuroendocrine carcinoma is a rare disease. Metastasis and recurrent disease are common. Due to the low incidence of small cell neuroendocrine carcinoma: there are no randomized trials specific to this disease. optimal therapy has not been delineated. More effective therapies are needed because most patients had local or distant failure

Conclusion



Figure 3: Axial slice of a contrast-enhanced abdominal CT scan showing liver lesions with a secondary appearance.

Méthodes et Matériels

- A patient case of Small cell neuroendocrine cervical carcinoma : a 76 year old male.
- Hospitalized in our ENT department in june 2022

Références

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- [3] Wakasaki, T., Yasumatsu, R., Masuda, M., Matsuo, M., Tamae, A., Kubo, K., ... & Nakagawa, T. (2019). Small cell carcinoma in the head and neck. Annals of Otology, Rhinology & Laryngology, 128(11), 1006-1012.