

# Sinonasal lymphoepithelial carcinoma is UCNT's evil cousin: Case report of an extremely rare neoplasm

R. Braham 1, O. Zitoun 1, A. Chakroun 1, A. Methnani 1, M. Dhaha 1, S. Jbali 1, S. Dhambri 1, S. Kdous 1.  
1Salah Azaiez Institute - Tunis (Tunisie)

## Introduction

Sinonasal lymphoepithelial carcinoma (SNLEC) is an extremely rare malignancy. The nasal and paranasal cavities are the most common location of this highly aggressive neoplasm, making it a differential diagnosis to UCNT. We report a rare case of SNLEC.

## Methods

- We studied the case of a forty-one-year-old male presenting a SNLEC

## Results

**MRI:** Aggressive turbino-meatal mass in the right nasal cavity, bulging into the choana, extending to the sphenoid sinus, isoT1 (Figure3), high and heterogeneous T2 signal (Figure4), progressive and homogeneous enhancement



Fig3: Axial T1 MRI: isosignal mass of the right nasal cavity

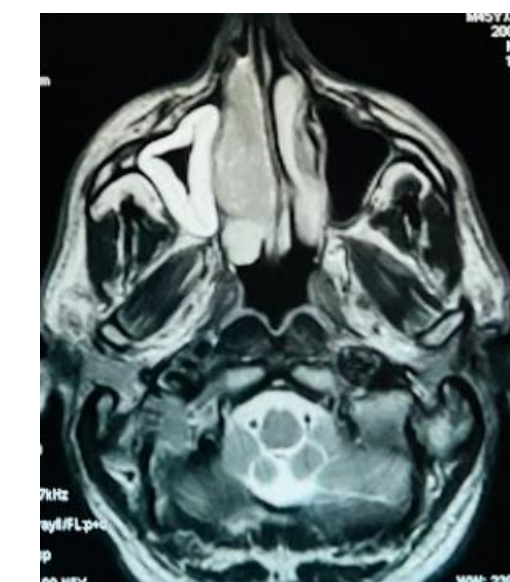


Fig4: T2 MRI: hypersignal heterogeneous mass of the right nasal cavity

Endoscopic resection → Syncytial massifs separated by a lymphoid stroma. Large cells: unclear cytoplasmic boundaries, rounded vesicular nuclei, prominent nucleoli, numerous mitoses, CK+, P63+. → **SNLEC**

Post-op MRI: Aggressive tumor residue: invading the maxillary sinus, its floor, bony palate and the lacrimonasal duct (Figure5)

Endoscopic Denker: Tumorectomy with removal of inferior turbinate, inter-sinus-nasal septum, septectomy and milling of nasal floor. No recurrence with 2 years follow-up (Figure6)

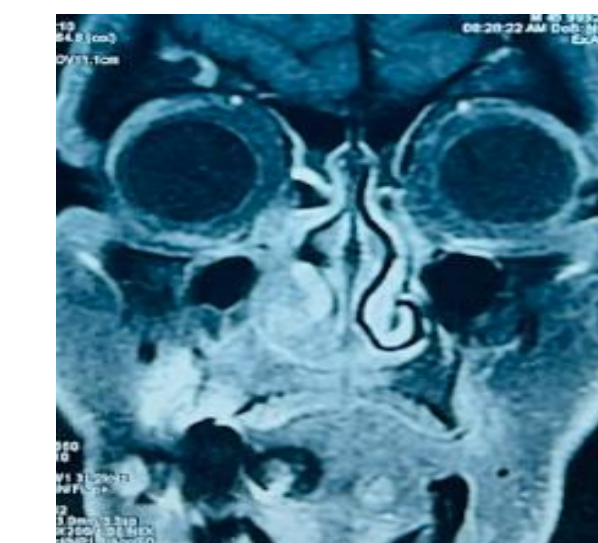


Fig5: Coronal T1 MRI: tumor residue in the right nasal cavity

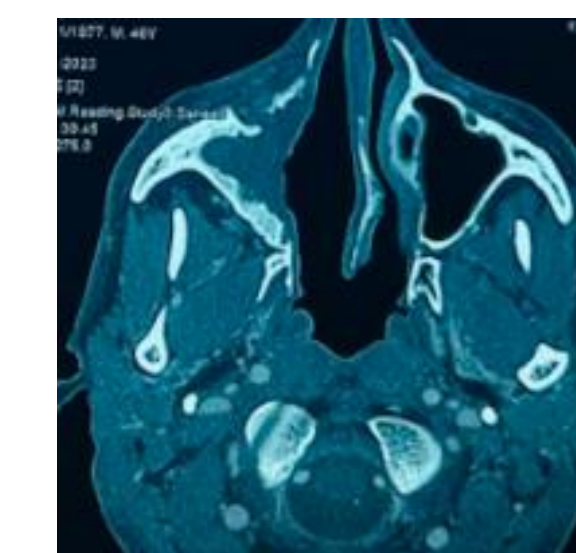


Fig6: Axial CT scan confirming absence of relapse

**Gender:** ♂

**Age:** 41 years-old

**Medical history:** No prior history

**Chief complaint:** Obstruction and bleeding of the right nasal cavity + purulent rhinorrhea

**Nasal endoscopy:** Fleshy tissue mass filling the right nasal cavity

**CT SCAN:** heterogeneous injection-enhanced tissue mass in the right nasal cavity, lysing the nasal septum (Figure1), middle turbinate and medial wall of the maxillary sinus (Figure2)

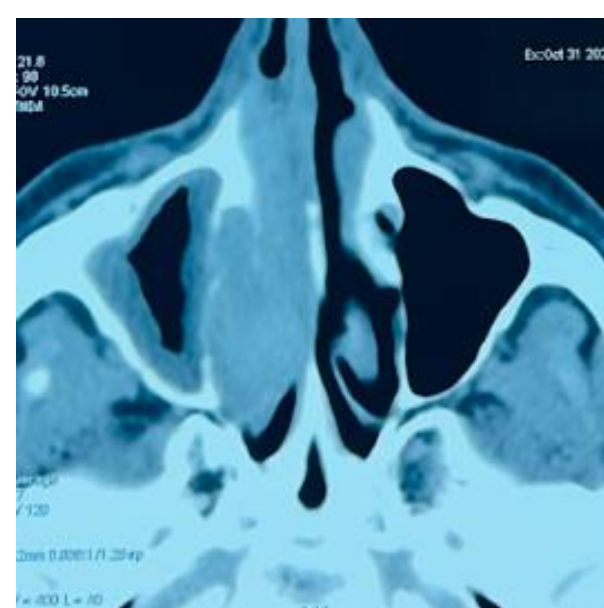


Fig1: Axial CT scan revealing tissue mass with lysis of the nasal septum

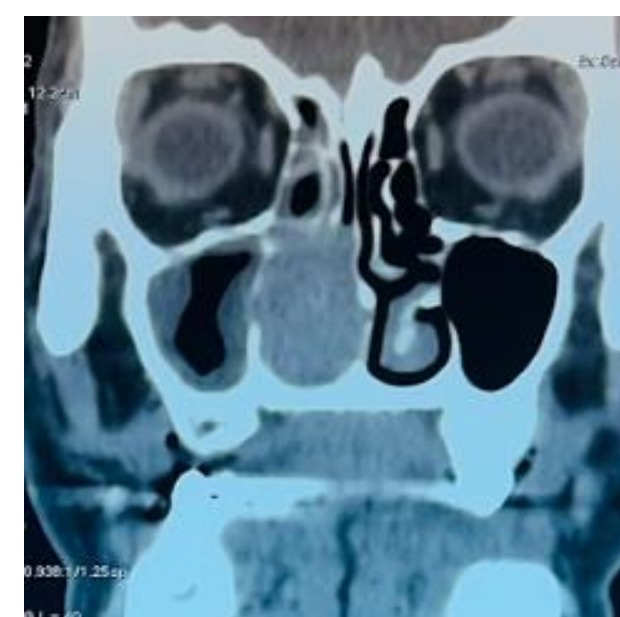


Fig2: Coronal CT scan revealing osteolysis of the middle turbinate and medial wall of maxillary sinus

## Discussion

SNLEC is a rare cancer typically arising in the nasal and paranasal cavities. It is characterized by the presence of undifferentiated epithelial cells interspersed with a dense lymphoid stroma.

It shares histological similarities with nasopharyngeal carcinoma, making it a challenging differential diagnosis.

Its etiology remains unclear, although EBV infection is thought to play a significant role particularly in endemic regions.

Treatment usually includes resection followed by adjuvant radiation or chemotherapy. However, due to the rarity of this cancer, optimal treatment strategies have not been well-established, and outcomes can vary.

## Conclusion

- SNLEC is an exceptional malignancy, often associated with EBV, and can be mistaken for UCNT. Treatment typically involves surgical resection followed by adjuvant therapy.

## References

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