

Otorhinolaryngology Malignancies in Children: A Case Series

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Abstract: Background and Objectives Ear, nose and throat (E.N.T.) malignancies in children are rare and can have different characteristics than those occurring among adults. Early diagnosis and treatment can improve the survival rates. The aim of this study was to determine the incidence of different E.N.T. malignant tumours in children and the way they presented so that they could be diagnosed early and managed efficiently in time. The other object of the study was to highlight the clinical, pathological, diagnostic and therapeutic features of E.N.T. malignancies in children which were of paramount importance in their effective management.

Material and Methods This hospital-based observational study reports on the incidence of different E.N.T. malignancies in children seen over a period of 5 years in the Department of E.N.T. in a tertiary care medical college hospital. We studied 25 patients in this case series of paediatric E.N.T. malignancies.

Results E.N.T. malignancies accounted for approximately 20% of all paediatric malignancies. We observed 17 (68%) cases of carcinoma while mesenchymal malignancies were seen in 8 (32%) cases. Mesenchymal tumours included rhabdomyosarcoma, fibrosarcoma, and neuroblastoma etc. The nasopharynx and laryngopharynx were two of the commonest sites. Other less common sites were the parotid gland, nose and paranasal sinuses, tongue, oesophagus and larynx.

Conclusion The E.N.T. malignancies in children are rare and constitutes 20% of all paediatric malignancies. Carcinoma was found more common (68%) than the sarcoma (32%). The nasopharynx and laryngopharynx were found to be the most common sites. They usually present with features that are common in benign illnesses thereby masking the serious nature of the disease. However, the awareness about these tumours and complete examination and early imaging studies and biopsy in suspected children can secure early diagnosis. Radiation therapy is commonly used either alone or with chemotherapy. Radiotherapy can also be given either before or after surgical excision. The pathological nature of the tumour and the time taken to start definite treatment determines the prognosis.

KeyWords: Children, Malignancy, Otorhinolaryngology, Pediatric, Tumors, Cancer, Head and neck

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