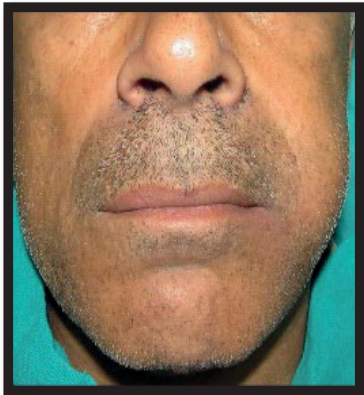


# TRAUMATIC NEUROMA : A CASE REPORT

AUTHORS: PRIYA DEVI, ERAM KHAN, SHARON JOHN, KRITI SHRAMA, S. RAMYA, SHALINI GUPTA\*  
AFFILIATION : KING GEORGE'S MEDICAL UNIVERSITY

## CHIEF COMPLAINT



35 year old male patient presented with a chief complaint of swelling in the left cheek region for 3 months.

## GROSS DESCRIPTION



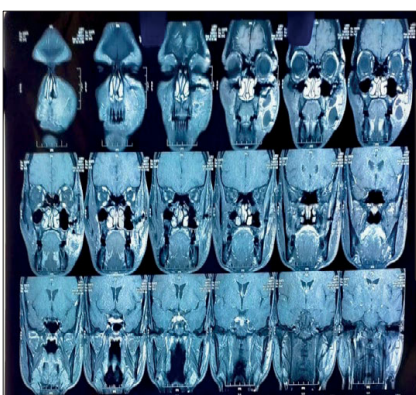
Size: 2.0 x 0.7 x 0.7cm  
Firm in consistency, creamy brown in colour, and irregular shape and surface.

## CLINICAL FINDINGS

### EXTRA-ORAL FINDINGS

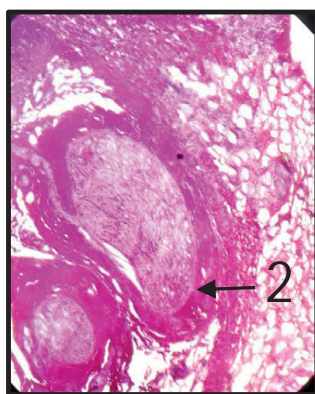
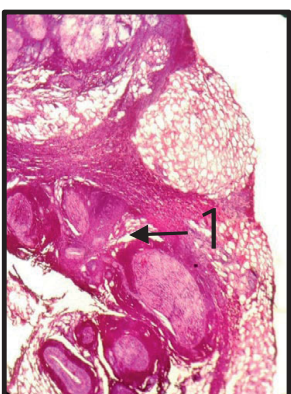
- Lesion: swelling
- Size: 2x3 cm
- Consistency: firm
- Non-tender, non-fluctuant
- Extent: Left malar region to infra-orbital region
- Lymph nodes: Non palpable

## RADIOGRAPHIC FINDINGS



Well circumscribed, radiolucent lesion

## HISTOPATHOLOGICAL FINDINGS



1. Numerous cross sections of nerve fibre bundles of varying sizes distributed in the connective tissue stroma
2. nerve fibres bundles surrounded by perineurium

## CLINICAL FEATURES

- Smooth-surface
- Middle-aged adults
- Female predilection
- Jawbones after tooth extraction or, or in submucosal tissues as a nodule of the mental foramen area, the lateral tongue, and the lower lip
- Well-demarcated radiolucencies
- Nonpainful, but sometimes may occur with mild tenderness

## PATHOGENESIS

Disorganized overgrowth of nerve fibres, Schwann cells, and scar tissue occurring at the proximal end of a severed nerve

Tends to regenerate by sending axons toward the distal segment

Granulation or scar tissue interferes with this process  
THEN

The regenerating fibres turn back on themselves and proliferate randomly to produce a mass similar to a ball of worms.

## IMMUNOHISTOCHEMISTRY

CD 68 & S-100

## TREATMENT

Conservative surgical removal

Lesions associated with larger nerves may require selective microsurgical removal of the irregular neural mass.