

Squamous Cell Carcinoma of Tongue – Case Report

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ABSTRACT

Background: The case report presented strongly suggests that an individual's health can be significantly impacted by poor nutritional status and lifestyle habits, such as chewing tobacco. The report details the case of a 45-year-old woman who was referred to the oncology department due to an oral ulcer. An MRI revealed the specific location of lesions on different parts of the tongue. The report highlights the connection between oral ulcers, tobacco use, and the development of oral and tongue cancer.

Conclusion: The report documents a case of squamous cell carcinoma of the tongue associated with tobacco chewing.

Key Words: Squamous cell carcinoma of tongue; Tobacco chewing

Introduction

Tongue squamous cell carcinoma is an aggressive form of cancer that often requires a comprehensive treatment approach involving surgery, radiation, and chemotherapy. Despite treatment, patients with stage I and II tumors can experience frequent recurrences and even succumb to the disease. The majority of malignant oral tumors are Oral Squamous Cell Carcinomas (OSCC), with the tongue being a common site. Historically, OSCC has been more prevalent in men, but recent trends suggest an increasing proportion of women affected. Risk factors include alcohol consumption and tobacco use. The TNM classification guides treatment based on tumor stage, but long-term survival rates remain relatively low. This study aims to identify histological patterns associated with higher recurrence risk in early-stage tongue tumors [1-3].

Case Presentation

A 45-year-old Indian woman presented with tongue pain and a lump on the lateral border of her tongue. After examination and investigations, she was diagnosed with tongue carcinoma. She exhibited other symptoms like oral irritation, poor oral hygiene, and dehydration. Tongue cancer, commonly found in individuals aged 40-50, typically occurs in the anterior two-thirds of the tongue and is more prevalent in men and black individuals. Various classifications and conditions are

associated with tongue cancer, including leucoplakia, which can undergo malignant changes. Diagnostic Assessment: Investigations included an ultrasound Doppler scan that revealed normal veins, while a biopsy confirmed squamous cell carcinoma of grade 2. Additional tests, such as chest X-rays and endoscopy, appeared normal. Treatment included radiation therapy, chemotherapy, and medical management with pain relief and nutritional support. Outcome and Follow-Up: After the initial round of radiation therapy and chemotherapy, the patient was discharged with plans for a second round of radiation therapy after 12 weeks.

Discussion

Squamous cell carcinoma of the tongue is strongly linked to tobacco and alcohol use. The cancer often originates from the sides and base of the tongue due to pooling of carcinogens. Despite the ease of visual examination, these cancers are frequently detected late as they are painless and ignored by patients. Over time, they eventually manifest as a persistent ulcer that displays continuous growth. This is due to the extensive network of lymphatic vessels in the tongue, leading to common occurrences of nodal metastases (37%-58%) at the time of diagnosis more frequent than in any other oral cavity site. The patient in question has a prolonged history of lifestyle choices that have significantly damaged the oral cavity, primarily due to high rates of tobacco consumption

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[4-6]. The diagnosis is based on both a clinical examination of the patient's oral cavity and laboratory analysis of the Biopsy Report, revealing a Grade-2 Squamous Cell Carcinoma. Furthermore, the MRI -Neck Contrast report indicates lesions symmetrically positioned in the anterior 2/3rd and posterior 1/3rd of the tongue, including the left lateral border. A study by Okubo M investigated the incidence of SCC of the tongue dorsum, revealing a minimal occurrence (0.8%) out of 368 tongue cancer cases. Advanced cases of tongue dorsum cancer were treated with super selective intra-arterial chemo radiotherapy for preservation of the organ. While some authors suggest SCC of the dorsum arises from conditions like median rhomboid glossitis or oral lichen planus, there is no definitive link, and biopsies are recommended for irregular or painful lesions. In our series, dorsum lesions preceding SCC were identified as geographic and fissured tongue with chronic glossitis, and lichen planus, though we exclude the latter from precancerous categorization. Gaillard F suggests that smaller

reconstruction determined by the extent of the defect. Radiotherapy is often employed, either alone or in conjunction with surgery, especially for advanced cases [7-9].

tumors can be excised through hemi glossectomy or partial hemi glossectomy, with

Conclusion

Squamous Cell Carcinoma (SCC) of the tongue is closely linked to the consumption of tobacco, a common occurrence. It can coexist with other noncancerous oral conditions. Therefore, the primary means of diagnosing the disease involves biopsy and histological examination. This case report emphasizes that oral carcinoma, largely attributed to tobacco use, underscores the need to raise awareness among younger individuals about avoiding detrimental lifestyle habits that can lead to severe health consequences. Early and timely diagnosis, followed by appropriate collaborative management, can lead to a positive prognosis for tongue cancer cases.

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