Atypical Lipomatous Tumour Of Right Thenar Region. A Case Report.

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INTRODUCTION:

The term atypical lipomatous tumors (ALT) refer to a group of adipocytic soft tissue tumors which are locally aggressive but have very low potential for metastasis. ALTs of the hand are not uncommon although incidence rate is not available in the literature. They account for around 40-45% of liposarcomas. The reported rate of local recurrence was 15% and the percentage of dedifferentiation is close to 1%.(1)

39 years old right-hand dominant man presented

CASE REPORT:

with right thenar region mass for the past 5 years. The mass was progressively increasing in size and started to have ulceration after injured by cigarette smoke. There was altered sensation over the thumb but no pain or weakness. On examination, swelling measures 8x5cm, dilated overlying veins, ulcerated tip, soft in consistency and non-tender. The movement of interphalangeal joint of right thumb was limited. Patient had hyperesthesia on the radial aspect of the right thumb. Allen test showed both digital arteries of the thumb were patent. MRI of right hand showed subcutaneous multilocular lesion with irregular septa on the volar aspect of right thumb measuring 3.2 x 6.0 x 5.5 cm. Elliptical incision was placed around the base of the swelling and the mass was removed en bloc under general anesthesia. The neurovascular structures and tendon were identified and preserved. Histopathological examination showed scattered neoplastic cells in extensive loose myxoid background, mild

nuclear atypia and rare mitoses. The swelling

was concluded to be ALT with ulceration.



Figure 1 shows right thenar mass



Figure 2 shows en bloc removal of mass

DISCUSSIONS:

Treatment protocol of ALT remains inconclusive. The main priority is complete removal of the tumor with wide tumor free margins. However, such surgery may sacrifice the hand functions. Therefore, some authors prefer conservation surgery with radiations which have excellent local control in ALT(1).

CONCLUSION:

Patients diagnosed with ALT that are planned for marginal excision should be informed on the rate of local recurrence and risk of dedifferentiation and they require long term follow up.

REFERENCES:

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