

Oral squamous cell carcinoma of the tongue in a young Lao patient: a rare case report and literature review

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Abstract

Oral cancer has been regarded as disturbingly high and diagnosed mostly among males, with median age at the diagnosis of tongue cancer was 61 years, with only approximately 2% of patients under 35 years old. Oral squamous cell carcinoma is rare in young age groups, and may misdiagnosed resulting for late treatment leading to poor survival rate. We report the case of a 27-year-old Lao woman with tongue cancer in the lateral posterior border area.

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Introduction

Oral cancer is a serious problem in many countries around the world. World Health Organization (WHO) has estimated that the incidence of oral cancer varies from one to ten cases per 100,000 people in most of the countries ^[1]. It has been realized that more than Fifty percent of oral cancer patients access services in the advanced stage^[2]. Oral cancer incidence and mortality is increasing in South East Asia, in cluding Laos, Oral cancer ranks as 13 th among all cancers in Laos^[3]. The most majority of malignant neoplasms in the mouth are squamous cell carcinoma (SCC). It located mainly in the tongue especially in the lateral posterior border area. It is not a frequent event in young patients only 2% of SCC cases occur in patients before 35 years and 7% before age of 45 ^[4-6]. There was affects in men aged over 50, the median age at the diagnosis of the tongue's cancer is 61 years, most of them with a history of high tobacco and alcohol consumption^[7,8]. Some studies have identified that male gender, older people, poor education status and socioeconomic class, consumption of smoked or non-smoked forms of tobacco, alcohol intake, human papilloma virus infection, oral sex and genetic susceptibility as the potential etiological factors in the causation of the oral cancer ^[1,9-11]. In this report the case of a SCC in young patient, 27 years old.

Case report

Twenty-seven-year-old, Laotian female patient, officer, living in Vientiane municipality, Laos come to the Faculty of Dentistry, University of

Health Sciences, in October 2020 with the complaint of intense pain associated to a left side of tongue lesion, with duration two months. Clinically, on intra oral examination, an extensive ulceration was observed, with largest diameter of 2 cm, irregular borders, necrotic background, surrounded by an erythematous atrophic area, located at dorsum and left lateral border of the tongue (Figure 1). Whitish areas could be observed in the periphery of the ulceration. There was hardening of borders and surrounding areas, indicating large infiltration. On extra oral examination, a cervical lymph node was detected on the left, fix and not painful. Medical history of the patients had no important episodes. Patient don't have history of smoking, alcohol consumption or any other harmful habits, Her family history no underlying disease. after detection of the lesion, a biopsy was performed, with the result of oral squamous cell carcinoma, well differentiated (Figure 2,3), the neoplasm classified as T1N1M0 (stage III), based on mouth cancer TNM classification criteria of the UICC/AJC.^[12] Patient was referred to the Mahosot Hospital for treatment, which consisted of surgery, namely total gloss rectory with cervical lymph node dissection. After surgery, treatment was completed with simultaneous radiation therapy and chemotherapy, for a three-month period. Patient is currently under a follow-up by doctors.



Figure 1: Lesion in tongue dorsum and lateral border, exhibiting deep and necrotic ulceration.

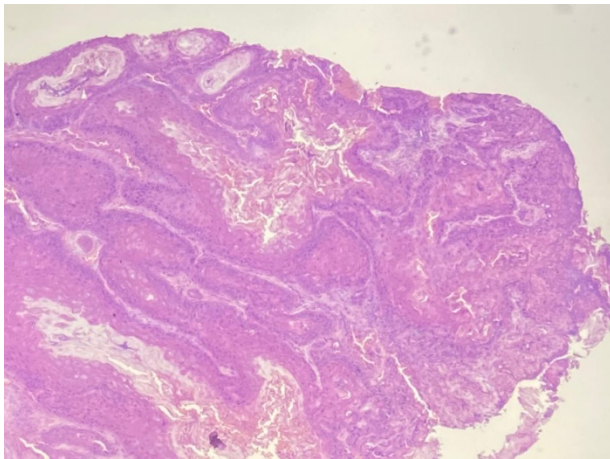


Figure 2: Low power showing neoplastic the nests and cords of pleomorphic epithelial cells (hematoxylin-eosin, 100x)

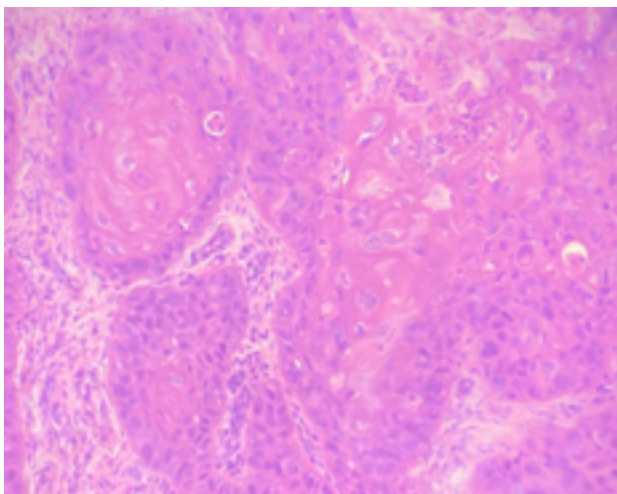


Figure 3: High magnification, nests of squamous cells invaded with chronic stroma well differentiated, as evidenced by keratin pearls (hematoxylin-eosin, 200x)

Discussion

SCC in young adults is rare. In this present report, patient was a very young female age (27 years old) and did not use any smoked or drinking habits,

with past medical history were not significant. As her family were no case of cancer. The prevalence of oral potentially malignant disorders and oral cancer was found to be in males.^[13] this may be attributed to difference in tobacco conception and cultural, dietary and environmental factors. Oral SCC is not a frequent event in young patients and observation of case such as that described here should involve a careful clinical study, to prevent and early detection of this disease the clinical examination may be useful; most malignant oral tumors are not detected until they are in advance stages. This might be due to lack of knowledge among dentists and also patients' ignorance, by the way the Oral squamous cell carcinoma remains painless also prevents the patients to approach dental surgeons. Further in-depth studies are needed to better understand the behaviour and carcinogenesis process in these patients.

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