

“Fibroepithelial Polyp Of The Tongue- An Unusual Pattern”; A Case Report

Chinnu V A¹, Tinky Bose C², Asish R³, Sunu Ramachandran⁴, Ganesh SL⁵

¹Post Graduate Student, Department Of Oral Medicine And Radiology, Government Dental College, Thiruvananthapuram/Kerala University Of Health Science, India)

²Professor And Head Department Of Oral Medicine And Radiology, Government Dental College, Thiruvananthapuram/Kerala University Of Health Science, India)

³Additional Professor, Department Of Oral Medicine And Radiology, Government Dental College, Thiruvananthapuram/Kerala University Of Health Science, India)

⁴Additional Professor, Department Of Oral Medicine And Radiology, Government Dental College, Thiruvananthapuram/Kerala University Of Health Science, India)

⁵Post Graduate Student, Department Of Oral Medicine And Radiology, Government Dental College, Thiruvananthapuram/Kerala University Of Health Science, India)

Abstract:

Fibroepithelial polyps are common, benign, inflammatory lesions that occur on oral mucosa. Chronic trauma can predispose its occurrence. This case report is about an unusual pattern of a fibroepithelial polyp on the tongue of a middle-aged woman. Even though these are innocent lesions surgical excision was advised in this case considering the site, size, and esthetics.

Keywords: Fibroepithelial polyp, benign neoplasm, surgical excision

Date of Submission: 24-09-2024

Date of Acceptance: 04-10-2024

I. Introduction

A fibro-epithelial polyp is an inflammatory hyperplastic lesion in response to chronic irritation.¹ The polyp may be broad based (sessile) or narrow based (pedunculated).² Cooke described all the pedunculated swelling arising from a mucosal surface as “polyp” (fibro-epithelial polyp).³ These lesions are common in buccal mucosa, gingiva, lips, tongue, palate, and retromolar trigone.⁴ Traumatic Fibromas are the most common connective tissue tumors occurring in the oral cavity caused by trauma or local irritation. Rather than being a true neoplasm, they are merely fibrous overgrowths. Literature suggested the term fibro-epithelial polyp for such types of benign lesions.⁵ This case report is about a bizarre fibroepithelial polyp pattern on the tongue of a middle-aged woman.

II. Case Report

A 42-year-old female patient reported with a complaint of red coloured growth on her tongue for 2-year duration. Initially, growth was small with a gradual increase in size without any pain. No history of any trauma to the tongue and two episodes of bleeding while eating food were reported. The patient was under treatment for diabetes for 3 years and her habit history was non-contributory.

On examination patient was apparently normal clinically except for an erythematous, pedunculated, lobulated, soft to firm, finger like growth of size approximately 2×1.5 cm noted on the anterior part of the dorsum of the tongue. It was nontender on palpation and no bleeding was elicited. The growth was attached to the tongue mucosa with a stalk of size approximately 0.8×0.8cm and the rest of its parts were separable from the tongue. The rest of the soft tissue of the oral cavity were apparently normal. Hard tissues examination showed attrition of 36 and 46. The blood routine examinations showed normal blood cell count, ESR, Clotting time and bleeding time. The hemoglobin value was found to be 11.5g/dl.

A provisional diagnosis of pyogenic granuloma, fibroepithelial polyp and vascular lesions was given.



Figure 1



Figure 2



Figure 3

Figure 1 Shows The Erythematous Growth On The Anterior Part Of The Tongue, Figure 2 Shows The Peduncle Of The Growth And Figure 3 Shows The Lobulated Fingerlike Growth Hanging From The Tongue.

Excisional biopsy was done under local anesthesia and the specimen was sent for histopathologic evaluation. Microscopic examination showed a hyper para keratinized hyperplastic stratified squamous epithelium overlying a moderate to densely collagenous connective tissue stroma. Vascularity of the stroma was moderate with forming and formed blood vessels. The inflammatory component was minimal. The histopathologic features were suggestive of fibroepithelial hyperplasia.



Figure 4 Showing Histopathologic Image Of The Lesion

Uneventful healing of excision site without any recurrence was observed.

III. Discussion

A fibro-epithelial polyp is the most common epithelial benign tumor of the oral cavity. Such a polyp is of mesodermal origin and it is a pink, red, or white knob-like painless growth that is sessile or pedunculated. commonly occurs on buccal mucosa, the tongue, or the gingiva.¹ In our case the lesion was reddish, pedunculated painless growth on dorsum of tongue. The fibroepithelial polyp develops in response to persistent irritation brought on by calculus, sharp tooth edges, unnatural denture borders, or overhanging restoration.⁶ But no history of chronic irritation on tongue was reported by the patient and the exact etiology was unknown. These lesions are rarely occurred before the age of 40 and there is no gender predilection reported. The provisional diagnosis of pyogenic granuloma was given considering the colour, texture and site of the lesion. Suspected vascular lesion because of multiple episodes of bleeding. Usually, these lesions are treated by conservative surgical excision. Other treatment modalities include the use of electrocautery, Nd: YAG laser, flash lamp pulsed dye laser, cryosurgery, intralesional injection of ethanol or corticosteroids or sodium tetradecyl sulfate sclerotherapy, etc.³ Recurrence rate of these lesions are very low.(1) Surgical excision was done for this patient and no recurrence was reported.

IV. Conclusion

Fibroepithelial polyps are common benign soft tissue lesion that occur on the oral mucosa. Surgical excisions should be considered if they affects the function and esethetics of the patient. Elimination of chronic trauma is necessary to prevent recurrence.

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