A 44-year-old man presented with a 1-year history of an enlarging, painless mass in the lateral left neck and facial edema (Picture 1). A physical examination revealed a bulky non-tender, palpable, mobile mass. Neck contrast computed tomography revealed a well-defined low-density area displacing the left sternocleidomastoid muscle laterally without contrast enhancement. Severe anterior displacement of the left internal jugular vein (IJV), dilated right IJV and transverse sinuses were noted (Picture 2). Neck magnetic resonance imaging demonstrated a hyperintense cystic lesion in
T1- and T2-weighted sequences (Picture 3). A diagnosis of second branchial cleft cyst (13.0 cm × 6.5 cm) was made, and surgical excision was performed (Picture 4). Histologically, the cyst wall was composed of squamous cells with lymphoid tissues. Branchial cleft cysts are rare congenital malformations of the lateral neck and typically present in early adulthood (1, 2). They are generally within 10 cm in diameter, but this was one of the bulkiest cases we had ever encountered, presenting with severe displacement of the IJV causing facial edema, although no headache or nausea were noted.

The authors state that they have no Conflict of Interest (COI).

References


The Internal Medicine is an Open Access article distributed under the Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International License. To view the details of this license, please visit (https://creativecommons.org/licenses/by-nc-nd/4.0/).