A Case of Solitary Fibrous Tumor in the Nasal Cavity Resected via Endoscopic Surgery

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The solitary fibrous tumor (SFT) is a rare neoplastic entity which typically originates from the pleura and other serosal tissues, and infrequently arises in the head and neck region. A 26-year-old female, who complained of nasal obstruction, was referred to us for a tumor in the left nasal cavity. A contrast-enhanced computed tomography scan showed a heterogeneously enhanced mass. The pathological findings of this hemorrhagic tumor on the first biopsy were compatible with a nasal polyp; however, the specimen on re-biopsy revealed a spindle cell neoplasm which was immunohistologically positive for CD34 and bcl-2, leading to the diagnosis of SFT. The tumor was endoscopically resected, the pathologic finding of which was identical to the preoperative diagnosis. The patient showed no evidence of recurrence four years after the operation. Immunohistological staining is essential for the diagnosis of SFT, as HE staining alone is insufficient to differentiate it from other tumors.

Keywords : solitary fibrous tumor, head and neck region, nasal cavity, CD34, bcl-2

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Endoscopic examination

A mass can be seen with a pale surface in the left nasal cavity. Arrows indicate the mass.

◇ : Nasal septum. △ : Lower turbinate. ○ : Middle turbinate.

Contrast-enhanced computed tomography scan

A heterogeneously enhanced mass can be observed. Arrows indicate the mass.

Staining of the tumor on the second biopsy

A: Hematoxylin and Eosin staining, $\times 400$.

B: CD34, $\times 400$. Positivity for CD34 is noted.

The histopathological findings were consistent with those of a solitary fibrous tumor.