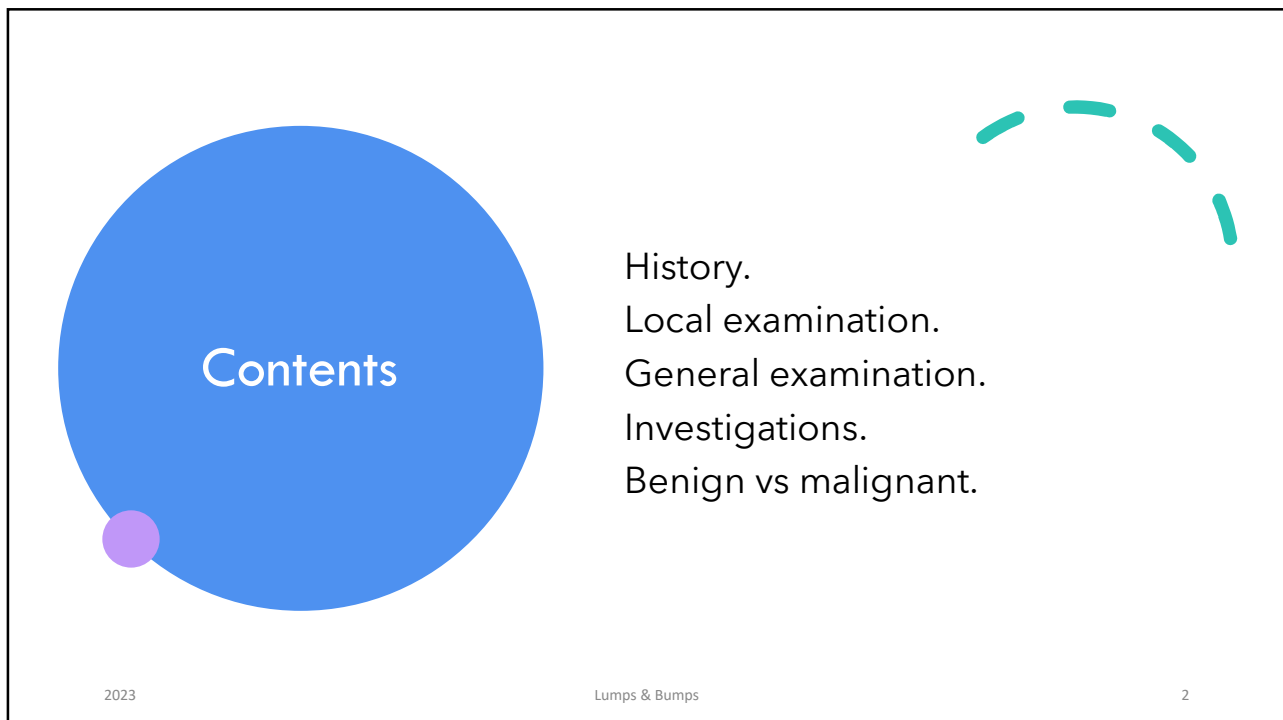


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## Introduction

### Lump:

- Vague mass of body tissue.

### Swelling:

- Any enlargement or protuberance in the body.
- Congenital, traumatic, inflammatory, neoplastic etc.

### Tumour or Neoplasm:

- A growth of new cells which proliferate independent of the need of the body.



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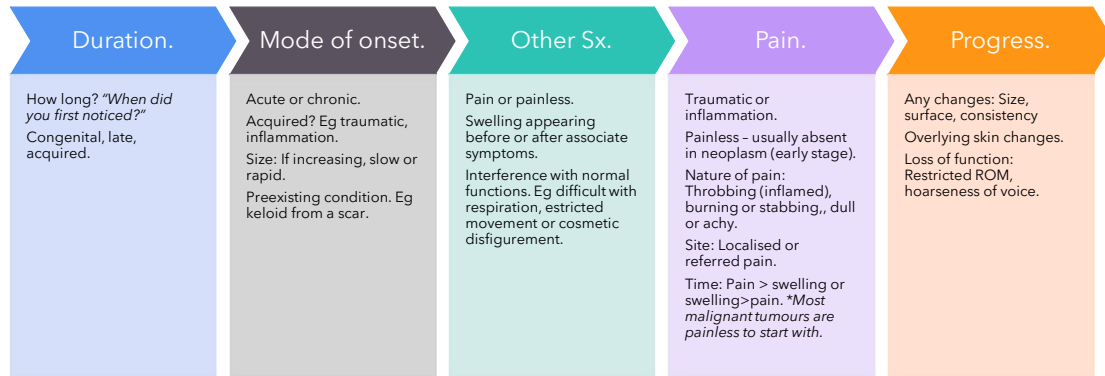
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# History.

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# History.



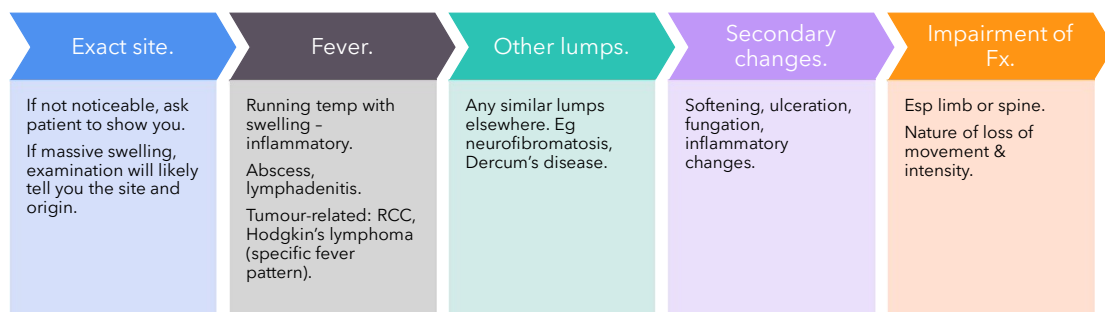
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# History.



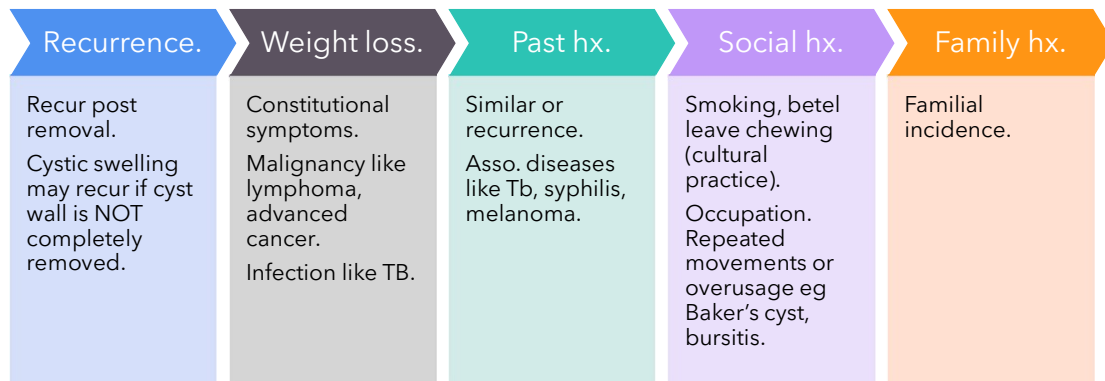
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## History.



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## Examination

General & Local.

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## Examination.

### General

- General impression:
  - Cachexia or malnourishment.
  - Patient's demeanor, attitude of affected body part or gait.
    - Anthalgic gait in painful limb.
    - Paralysis or paresis.
    - Displaced fracture or dislocation.
    - Disfigurement or distal wasting.
  - Syndromic facies.
- Vitals:
  - Temperature ↑/ HR↑.

### Local

- LOOK:
  - S: Site, shape, surface or skin overlying swelling.
  - P: Pulsation, peristalsis, pressure effect.
  - E: Edge.
  - C: Colour.
  - M: Movement (eg respiration, deglutition, protrusion of tongue).
  - N: Number.

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## Examination

### Local

- PALPATION: **INSPECT**
  - **I**: Impulse.
  - **N**: Number (single, matted).
  - **S**: Site, Shape, Size, Skin (colour, fixity).
  - **P**: Pulsation (expansile vs transmitted).
  - **E**: Edge (smooth, irregular).
  - **C**: Consistency, Compressibility.
  - **T**: Tenderness, Temp, translucency.

### Local

- Others: **FIRM**
  - **F**: Fluctuation.
  - **I**: Indentation.
  - **R**: Reducibility,
  - **M**: Mobility.

### Others

- Fluid thrill.
- Impulse on coughing - hernia.
- Relation to surrounding structures.
  - S/c tissue, muscle, fixity to underlying tissue ?involvement.
  - Tendon.
  - Nerves or vessels.
  - Bone or joints.
- Regional lymph nodes.
- PERCUSS - not really useful.
- **LISTEN!** Pulsatile swellings - bruits or murmurs.

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PALPATION OF SWELLING  
 PALPATION OF SWELLING  
 INSPECTION CONFIRM  
 I Impulse  
 N Number  
 S Site / Shape / Size / Surface / Skin  
 over swelling  
 P Pulsation  
 E Edge  
 C Compressibility  
 T Temperature / Tenderness /  
 Translucency  
 CON Consistency  
 F Fluctuation  
 I Indentation  
 R Reducibility  
 M Mobility

## Investigations

- Blood.
  - FBC, ESR, CRP, BSL.
  - Serology for infection or tumour.
- USS +/- FNAC (fine needle aspiration cytology) or MCS.
- Others:
  - XR - limbs, joints.
  - CT - collection, tumour involvement etc.
  - MRI musculoskeletal.
- Tissue biopsy.
  - Needle, punch or excision biopsy.

## Benign vs Malignant

	Benign	Malignant
Age	Younger.	Extreme of ages.
Duration	Slow growth.	Usually rapid.
Pain	Absent.	Absent but painful late stage.
Wt loss	Never.	Malignant.
Function	Usually not seen unless obstructing a joint.	Early involvement.
Constitutional Sx	No	Yes
Mobility	Freely mobile.	Fixed - infiltration.
Surface	Mostly smooth.	Usually irregular.
Margin	Define & smooth.	Not definite & irregular.
Consistency	Usually soft to firm.	Firm to hard, or varying consistency.

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## Benign vs Malignant

	Benign	Malignant
Pressure effects	Usually absent.	Often present.
Recurrence	Almost never - except incomplete removal/excision.	Often.
Secondary changes	Not seen.	Often.
Cell differentiation	Well-differentiated tissues.	Poorly or undifferentiated.
Capsule	Always encapsulated.	No capsule = infiltration.
Anaplasia	Nil.	Key feature.
Nuclear structure	Same as parent tissue.	Larger, hyperchromatic with mitosis.

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Thank you

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PGME Royal Perth Hospital

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