FP 19: Frontotemporal mass in oral cavity carcinoma: synchronous tumor or distant metastasis?

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Oral Cavity Squamous Cell Carcinoma ranks among the top ten most prevalent malignancies affecting patients, resulting in significant morbidity and mortality worldwide[1]. It has been estimated to be the sixth most common cancer[2], comprising about 38% of head and neck tumors[3]. Development of synchronous tumors and distant metastasis are two problems associated with oral cavity cancers. Both are rare and correlates with advanced stages of the condition. This propensity for synchronous tumor development and distant metastasis must not be underestimated as it plays a critical role in the management of patients. Furthermore, it worsens the quality of life and prognosis of patients. This article discusses a case of a 36-year-old female with a history of right gingival squamous cell carcinoma who presents with a left frontotemporal mass five months after initial diagnosis.

Primary tumor excision was performed with noted recurrence of mass, warranting another surgery. Chemotherapy or radiotherapy was not done. Subsequent work-up done revealed lytic changes in the frontotemporal area of the skull with intracranial and skin extension, and compression of the orbit.