

Parapharyngeal space tumours.

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Author information

Abstract

Parapharyngeal space tumours are rare, forming 0.5% of all head and neck tumours. They are of interest because of the varied histological types, diagnostic puzzle and challenge at surgical excision. Thirteen patients, seen over an eight year period (from 1981 to 1988) in the Department of Otolaryngology, Singapore General Hospital, are presented. Clinically most patients presented with a painless upper neck lump and on examination, a lateral pharyngeal wall bulge was noted. The main investigation after ruling out a nasopharyngeal primary tumour is a high resolution Computer Tomographic (CT) scan with intravenous contrast. Only if a vascular tumour is suspected on CT scanning, should angiography be performed. Pathologically, the commonest tumours are salivary gland tumours, neurolemmomas and paragangliomas. The surgical approaches at removing these tumours are discussed, emphasising maximal exposure and control of the vascular structures in the head and neck. Recognising these tumours enable the correct sequence of investigations to be performed rather than a 'lymph node' biopsy or 'tonsillectomy' which may be done resulting in an increased morbidity for the patient and an embarrassment for the attending physician.