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Vallecular cyst in adults

Cysts Vallecular are usually the retention cysts of the minor salivary glands. Common place of occurrence is lingual surface of the epiglottis. Epigletic mucous retentions, also known as Vallecular cysts or tongue cyst base. Small Vallecular cyst is asymptomatic. These can present different symptoms. In the latter, he describes the evaluation and treatment of a 60-year-old man who presented with dysphagia and dyspnea caused by great Vallecular cysts. Larline cysts constitute approximate 5 of the benign larynx lesions [1]. The lingual surface of the epiglottide is the commentest site [2]. These cysts were classified as ductal cysts, retention cysts and lymphoepithelial cysts. These are caused by inflammation, irritation or trauma [3]. LARINGEA cysts are rare entities with sporadic occurence and their prevalence and incidence are not known precisely. Epigletic mucous retentions, also known as Vallecular cysts or language cyst base, are ductal cyst deriving from obstruction and retention of mucus in the collectors of the submucosa glands located at the base of the language [4]. Vallecular cysts are generally considered self-limiting lesions of the larynx, but in early childhood, this entity can be associated with serious airway obstruction and power failure [5-7]. In adults, Vallecular cysts are more often asymptomatic and routine laryngoscopy or during anesthesia induction. These cysts can present sensation of foreign body in his throat, dysphagia, dyspnea, voice change, and snoring [3]. We present a patient with great Vallecular cyst who had a sensation of foreign body feeling and pain in his throat over two years and applied many times to doctors due to the complaints of him. An old 60 year old who presented the change, the dyspnea, dysphagia and a lump in his throat for two years with his voice. He has no other systemic disease. Previously he had been treated with an antiinflamatuar and antibiotics bias his symptoms for superior airway infections. The examination of him Otolaryngologycal of him was normal. But the Fibroscopic exam shown a great Vallecular cyst (Figure 1). Figure 1 Endoscopic preoperative of Vallecular cysts at computerized tomographic (TC) of the collar demonstrated a low density epiglottis and Vallecula (Figure 2). A magnetic rezolution (MR), the neck scan a large hyper-intensity cysts between the base of the language and epiglottis (figure 3). Figure 2 Axial CT Imagining the neck Figure 3 Sagittale MR Imagine neck The day of surgery, the patient was revalued and particular attention was paid to the airway of him. The point of view of the orofaringee structures was evaluated as a mallammed class 2. On the basis of assembly and the discussion with the anesthesiologist. Patients with Vallecular cysts have difficult airway potential, in addition to tracheostomy and other difficult airway equipment, an otorhinolaryngology specialist made available during induction and tracheal intubation anesthesia. Large caliber suction catheters were immediately available in the case of rupture and bleeding cysts. Under the nose-tracheal intubation with General Anaesthesia (figure 4), direct laryngoscopy and decomresion of the cyst with a long laryngeal needle have been performed. Then, the cyst edge displayed and cyst was Marsupialized (Figure 5). Figure 4 Nasotracheal Intubation of the patient Figure 5 Endoscopic view of Vallecula After removing cysts Histopathological examination of the removed material confirmed a Vallecular cyst. No problem arose during the anesthesia course, surgery is, and the postoperasive period, and the patient was discharged the third post-operative day. Å, postoperative 10th day, the examination of the patient € s was (Figure 6). Figure 6 Postoperative 10th day. Endoscopic view of laryngeal laryngeal cysts are rare, the first case reported has been published by Abercrombie J in 1881 [8]. Cisti Vallecular are cyst retention of the minor salivary glands of the Vallecula and the base of the language. language. Mucous glands leads to the formation of cysts and a continuous secretion leads to a corresponding inclusive of cyst. Vallecular cysts represent 10.5% at à €

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