

1999 - 4

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Clinical History:

A 30 year old man presented to another institution complaining of left sided hearing loss and left facial weakness. Imaging studies revealed a 2-3 cm mass in the left cerebello-pontine angle.

Exploration was done and a diagnosis of glomus tumor was established at the operation but removal or biopsy of the lesion was not attempted due to its extreme vascularity. The patient's symptoms progressed to complete facial palsy and total hearing loss on the left. Five years later, he presented with increasing pain over several months in the left suboccipital area. Imaging studies with CT and MRI revealed 5 cm vascular mass with multiple cysts in the left cerebello-pontine angle. Following pre-operative embolization, the tumor was removed via a translabyrinthine approach. The mass was found to be epidural and was easily dissected from the dura. The region of the middle ear was completely destroyed by tumor and no normal ossicula or other structures were identifiable. Except for this area, the tumor was well encapsulated.

Material submitted: H&E and unstained slide (one each)

Point of discussion: 1. Diagnosis
2. Cell of origin