



NASOPHARYNGEAL CARCINOMA IN PREGNANCY: A CASE REPORT

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BACKGROUND

Nasopharyngeal carcinoma in pregnancy presents a dilemma in managing the patient with much consideration to both the mother and the unborn child.

AIM

To present the challenges and successful outcome of nasopharyngeal carcinoma in pregnancy.

METHOD

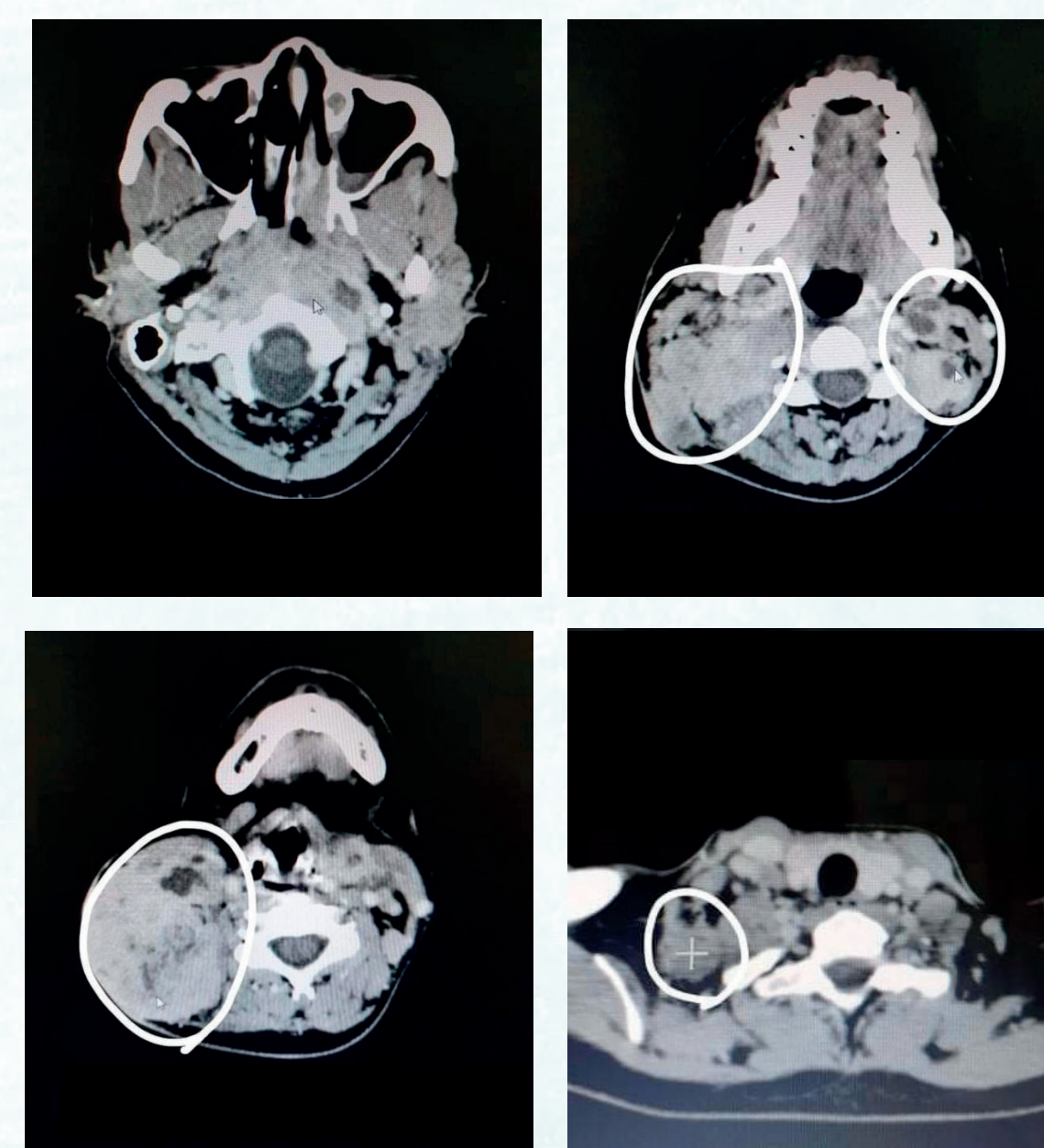
Case report

CASE PROFILE

This is a case of a 33-year old female who presented with a two-year history of gradually enlarging bilateral neck masses during her second trimester of pregnancy.

She has no known co-morbidities with no family history of malignancy. She is a G3P2(2002) mother, who single-handedly raised her two daughters for seven years. She was diagnosed with nasopharyngeal carcinoma at 23 weeks age of gestation. She is non-smoker, and non-alcoholic beverage drinker.

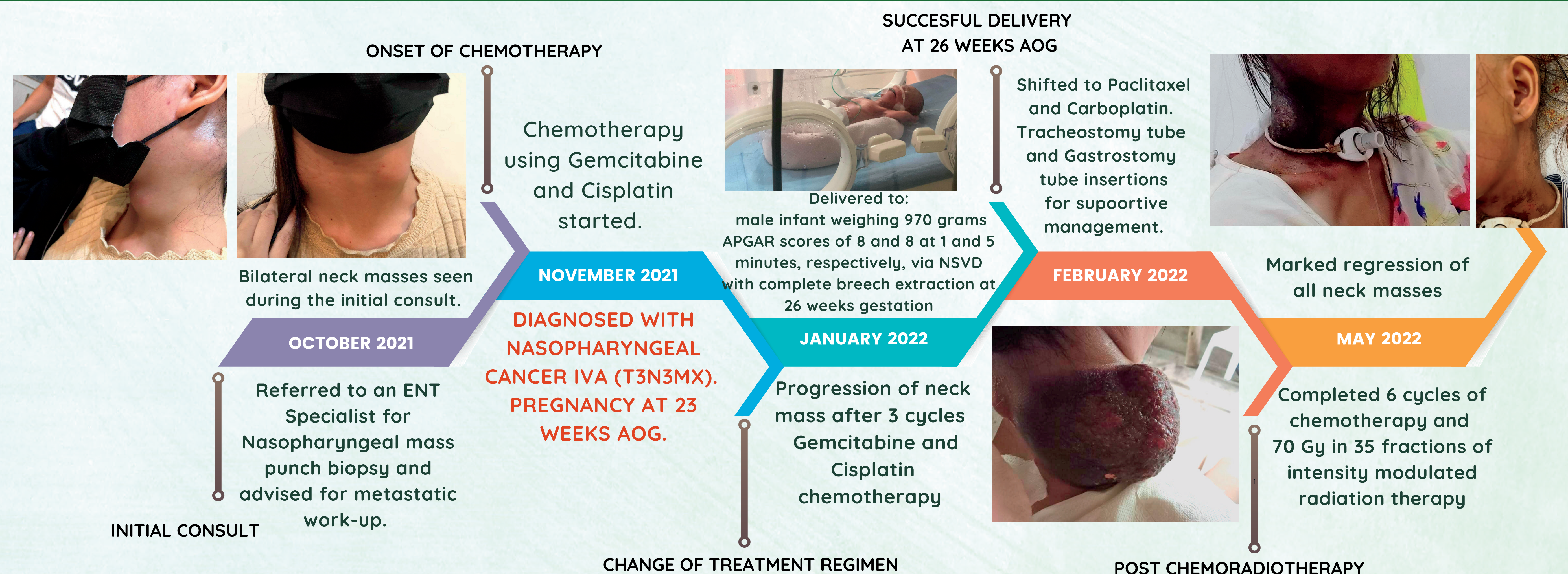
DIAGNOSTICS



Neck CT Scan showed a nasopharyngeal mass which was more prominent at the right measuring 3.3 x 5.3 x 3.0 cm. There were inhomogenously enhancing lobulated densities in the lateral cervical areas with the largest measuring 11.6 x 5.8 x 7.0 cm. Inhomogenously enhancing densities were seen in the supraclavicular, posterior and anterior cervical and submandibular areas with the largest seen at the right supraclavicular area measuring 1.8 x 2.5 x 2.1 cm.

Punch biopsy of the nasopharyngeal mass revealed it to be morphologically consistent with nasopharyngeal carcinoma, non keratinizing, differentiated type (T3N3MX).

SIGNIFICANT TIMELINE



CONCLUSION

Multidisciplinary approach is key to the successful outcome in managing a nasopharyngeal carcinoma in pregnancy. Induction chemotherapy can be initiated during the second trimester of pregnancy as a delaying measure in reaching a safer age of gestation to deliver the unborn child. Because of the deleterious effects of radiation to the fetus, radiation therapy can commence a week after the delivery. Shared decision making between the patient, spouse, and family members is highly encouraged from the time of diagnosis to guide the direction of management.

conflict of interest:
None

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