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MIDDLE EAR METASTASIS FROM LUNG ADENOCARCINOMA AS THE INITIAL SIGN OF DISSEMINATED DISEASE: A CASE REPORT

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Objective: MIDDLE EAR METASTASIS FROM LUNG ADENOCARCINOMA AS THE INITIAL SIGN OF DISSEMINATED DISEASE: A CASE REPORT

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BACKGROUND: Secondary cancers of the temporal bone arise more frequently from mammary, renal and bronchogenic carcinomas, all of which show a tendency to metastasize to bone. The pathogenesis of spread to the temporal bone is most commonly by the hematogenous route, but extension from intracranial involvement has also been noted. Cancer metastasis to the temporal bone including middle ear are relatively uncommon and these metastases are rarely presenting signs of an unknown primary. Affected patiens are often asymptomatic for a long time. When signs and symptoms of middle ear metastasis do manifest, they may be misinterpreted as otitis media or mastoiditis.

CASE: We report an unusual case of lung adenocarcinoma metastatic to the middle ear in 52-year old woman as the initial sign of disseminated tumor of unknown origin. Her father and brother died from lung carcinoma. She was a smoker. She complained of otalgia for a two months and was admitted to our Clinic with suspicion of mastoiditis. A computed tomography (CT) scan revealed destruction of left mastoid air cells and the presence of a soft tissue density in the left mastoid. She underwent a radical mastoidectomy. The biopsy were obtained. The histopathologic examination of the mass demonstrated adenocarcinoma with possible metastatic origin in breast, lung or gastrointestinal tract or primary adenocarcinoma of the middle ear. Bronchoscopic examination was done and endobronchial cytology and pathology with immunohistochemistry revealed adenocarcinoma of pulmonary origin.

CONCLUSION: The carcinoma in temporal bone must raise the suspicion of metastasis. The neoplasm must frequently responsible is breast carcinoma but lung cancer must also be considered in smoking patients.