

A Case of a Large Choanal Polyp

Takahiro ITO and Toru SEKITANI

*From the Department of Otolaryngology,
Yamaguchi University, School of Medicine.*

(Received December 2, 1965)

The choanal polyp in child is relatively rare in occurrence. Walter E. Heck and others (1) reported that two of 64 patients of the choanal polyp were less than 9 years of age. Killian (2), in 1906, was the first to describe the true site of the choanal polyp and found that it arose generally in the maxillary antrum. The choanal polyp was first removed through the maxillary sinus by Ino Kubo who reported that in his case it originated from the maxillary mucosa.

In this paper, a case of a large choanal polyp which was found a nine-year-old girl is reported.

REPORT OF CASE

This girl, aged 9, was admitted to our clinic on September 13, 1965. She gave me the following episode. Prior to admission, her mother found out a mass just behind the uvula, which moved pendulously. She was seen by some otolaryngologist who recommended to consult with our clinic for operation. She had occasionally had snoring for about one year, though she had never complained of nasal obstruction, nasal discharge, nasal bleeding or impaired hearing at all. She had not suffered from allergic disease. There was no family history of allergy.

General examination was normal. On local examination, the right eardrum was slightly retracted and the left eardrum was normal. Both nostrils were clear, except

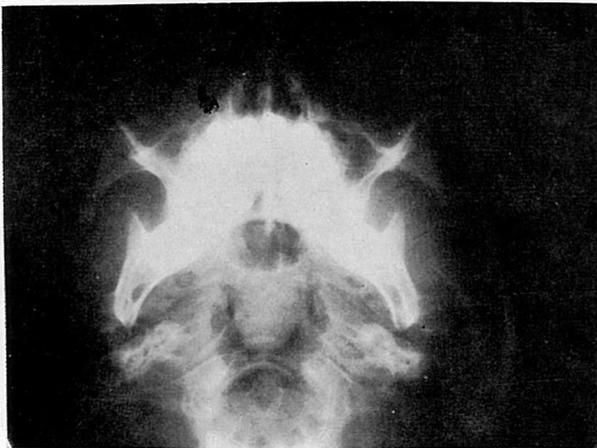


Fig. 1
Verticomeatal view of the nasopharynx showing a large choanal polyp.

the inferior turbinates were slightly swollen. A stalk of the mass was seen on the posterior part of the right middle meatus. In the postnasal area, a thumb head sized mass, flat and white in color without vessel engorgement was seen. It filled the major part of the nasopharyngeal area, moving pendulously and hiding occasionally in the epipharynx. The larynx was normal. A large mass could be seen in the nasopharynx on verticomental view (Fig. 1). X-ray of the nose and paranasal sinuses revealed a cloudiness on the right maxillary and ethmoidal sinuses. Routine blood examination disclosed 82% hemoglobin, 380×10^4 red blood cells and 9,200 white blood cells on admission. Hearing test showed normal. ECG findings were within normal limits.

On September 14, she was performed on a removal of the mass on the nasopharyngeal area under general anesthesia. The stalk of the mass on the posterior portion of the right middle meatus was dissected with nasal forceps, after needling the mass was done for holding through the mouth. The mass was removed easily by the pulling of the thread. After operation she made an uneventful recovery and was discharged from our clinic on the sixth postoperative day.

Macroscopical findings were as follows; The specimen measured 4.7 by 2.5 by 2.0cm. in diameter and was elastic soft (Fig. 2). It's surface was smooth, white milky in color without vessel engorgement. On section, the cut surface was milky in color and gelatinous in texture homogenously. Microscopically the sections were lined on the outer surface by the stratified columnar epithelial cells, some of which

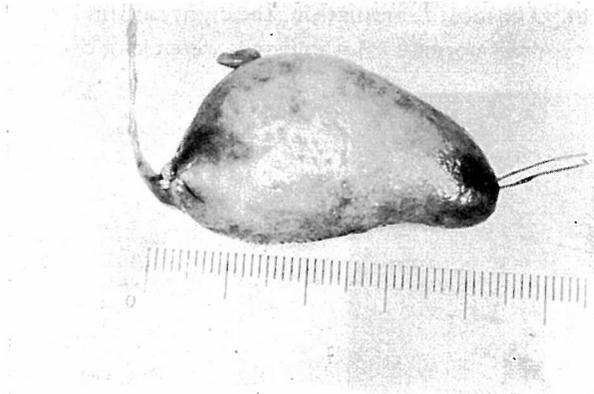


Fig. 2

Photograph of a large choanal polyp.

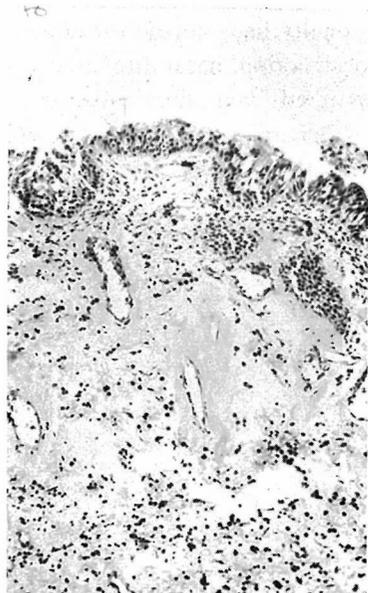


Fig. 3 Micro-photograph of the choanal polyp. $\times 100$ HE.

showed cilia (Fig. 3). The stroma was composed of loose strands of myxomatous connective tissue. There was slight infiltration of lymphocytes, leukocytes and plasma cells around several capillaries in the submucosal tissue. The histological diagnosis which was reported by Dr. Takahashi of Department of Pathology was typical fibromyxomatous polyp.

SUMMARY

A case of a large choanal polyp which seems to originate from the right maxillary sinus is reported.

REFERENCE

1. Walter E. Heck, Olav E. Hallberg and Henry L. Williams: Antrochoanal polyp. *Arch. of Otolaryngology* 52 : 538-548, 1950.
2. Killian, G.: The origin of choanal polypi. *Lancet* 2 : 81-82, 1906, cited by Walter E. Heck (1).