



**KARNATAKA RADIOLOGY EDUCATION PROGRAM**

**CASE PRESENTATION**

Right Jugular foramen lesion

MENTOR: DR G C PATIL SIR

KMCRI, HUBBALLI.

-Mr A

-70 Years/ Male

**Presenting complaint:**

Right ear pain:3 months

Right ear hard of hearing : 3 months

K/C/O: Hypertension on medication since 1 year

# Local Examination:

## Right Ear

- Pinna : Normal
- EAC: Posterior canal wall Saggy, Lumen: Normal.
- Whitish Debris present in Canal: Cleared as much as possible; Tenderness present while clearing
- TM: Not visualised

## Left Ear

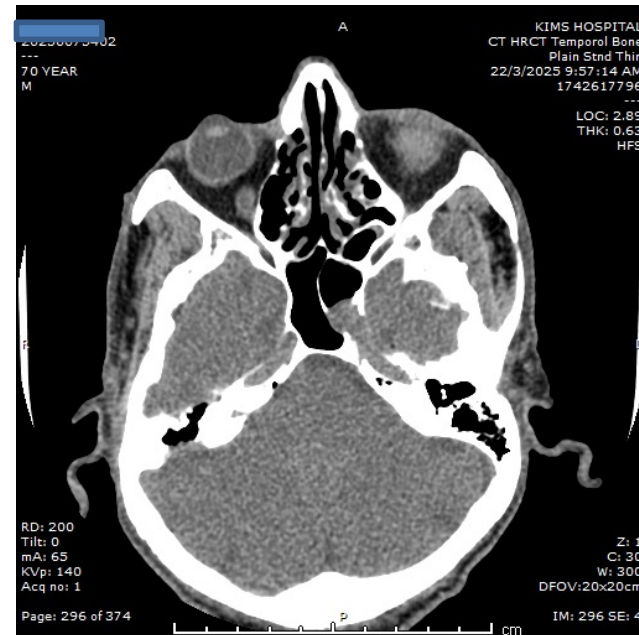
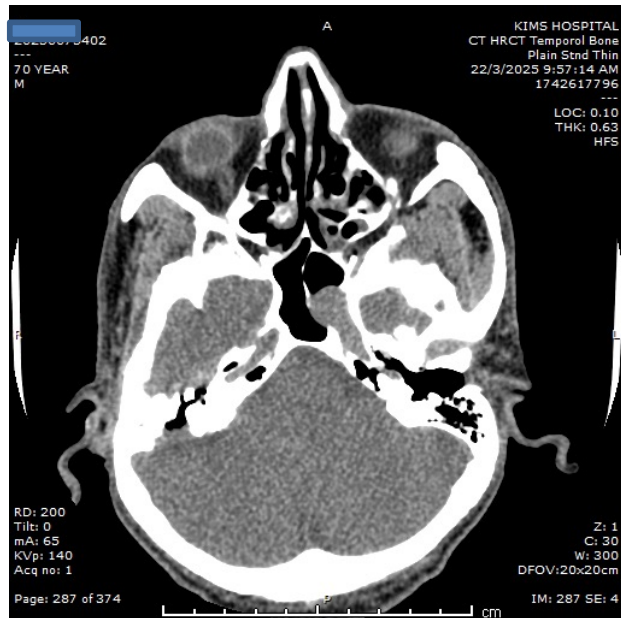
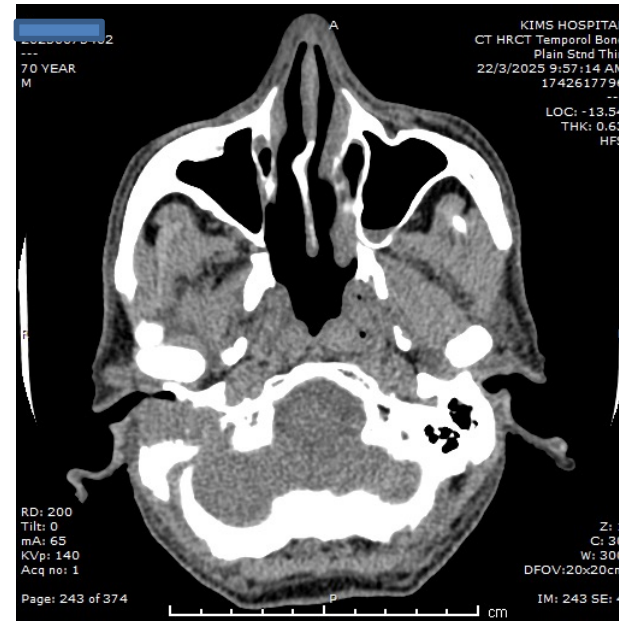
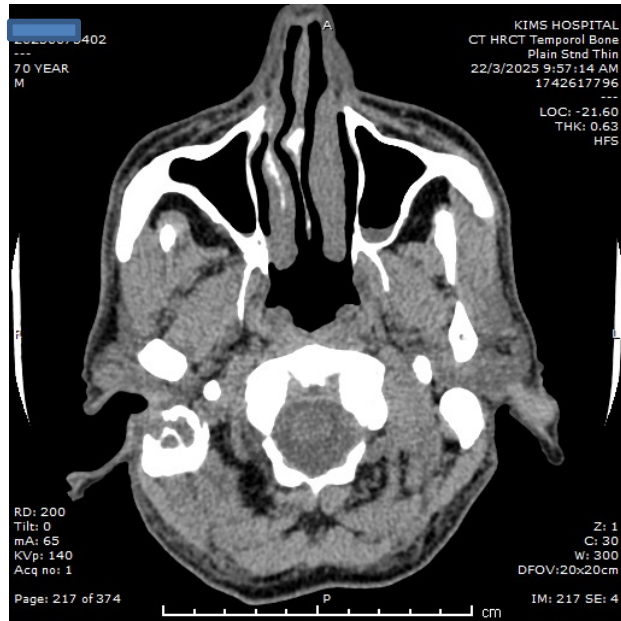
- Pinna: Normal
- EAC : Normal
- Canal : Normal
- TM: Retracted

# X-RAY SKULL (FRONTAL & LATERAL)



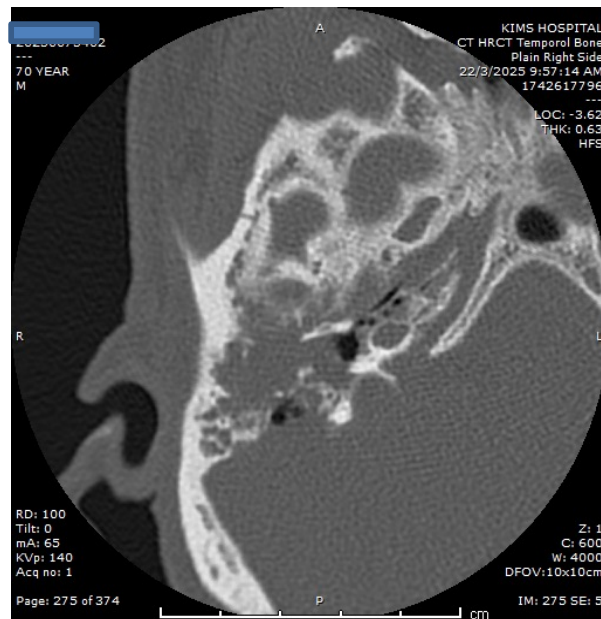
# CT(Plain & Contrast)

(From caudal to cranial end)

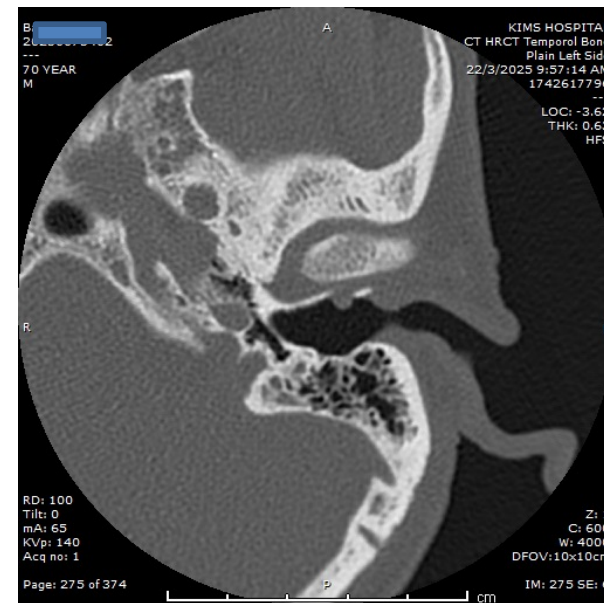
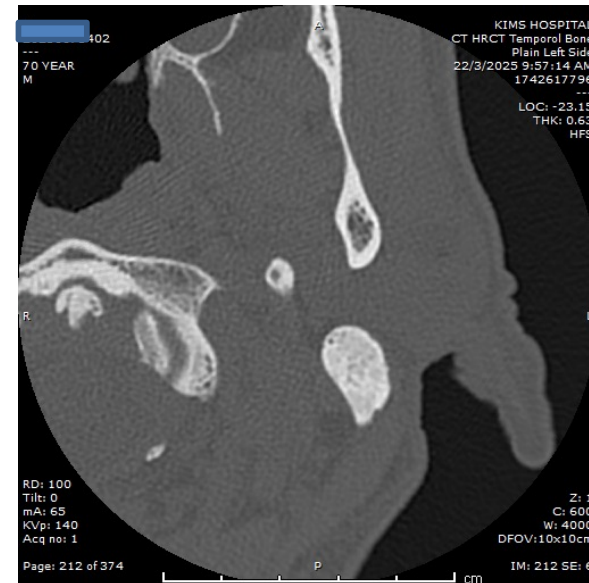


# Bone-window

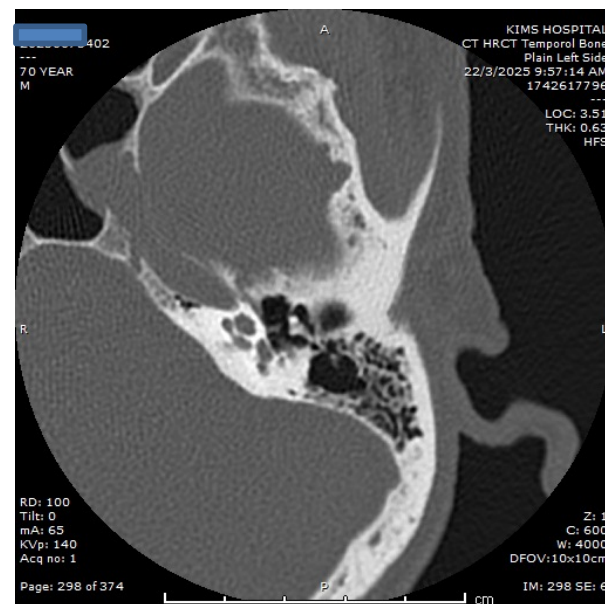
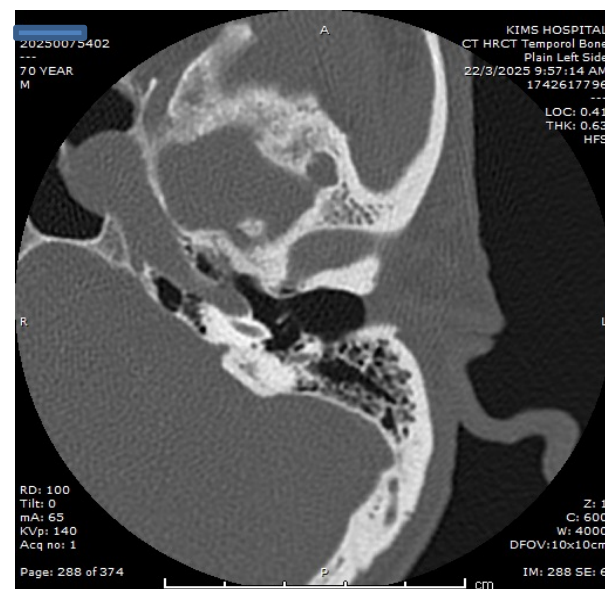
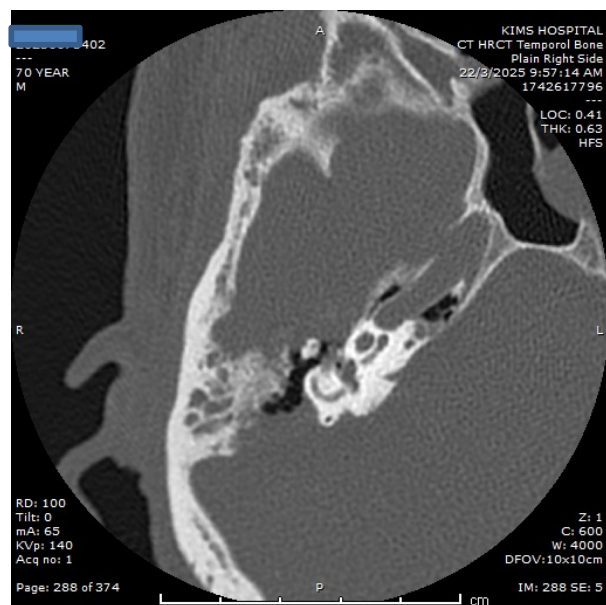
## RIGHT



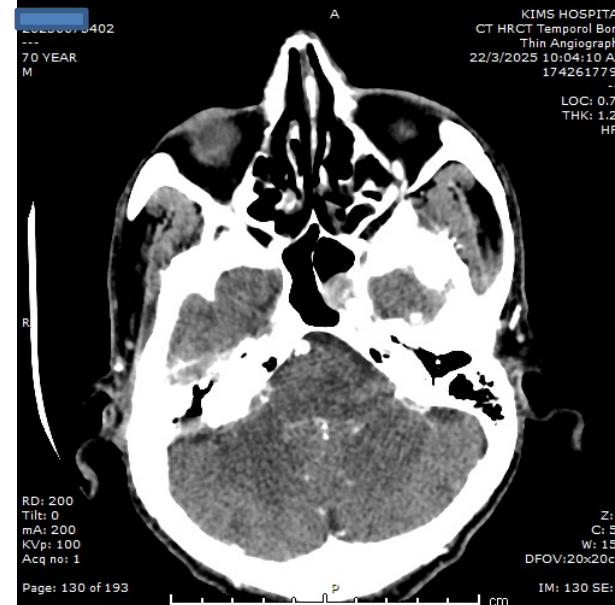
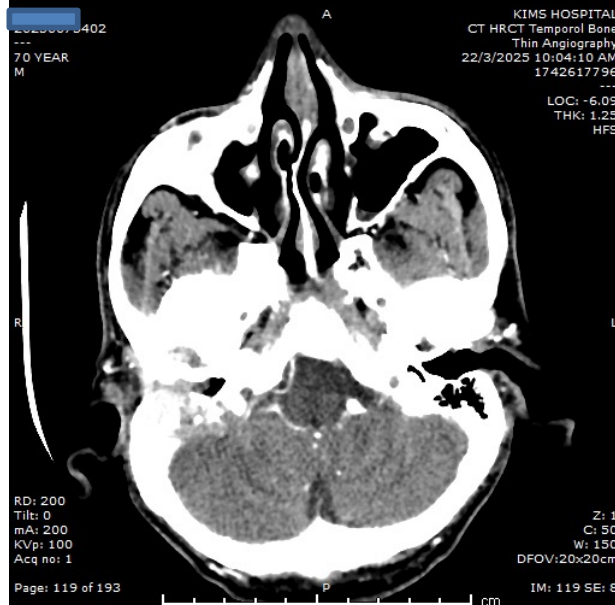
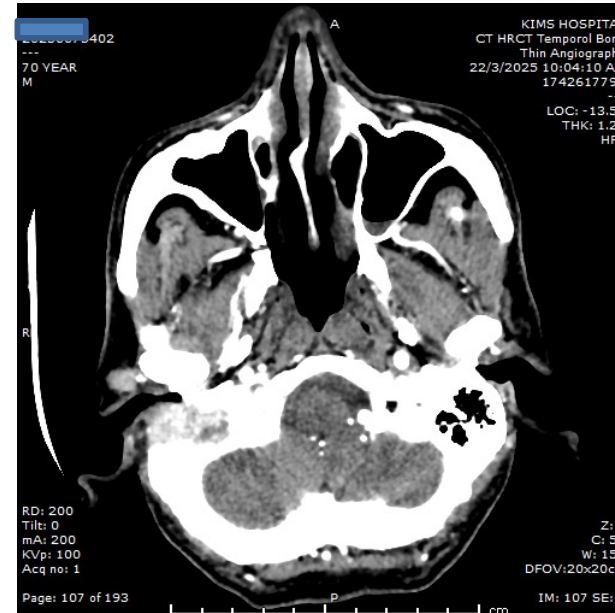
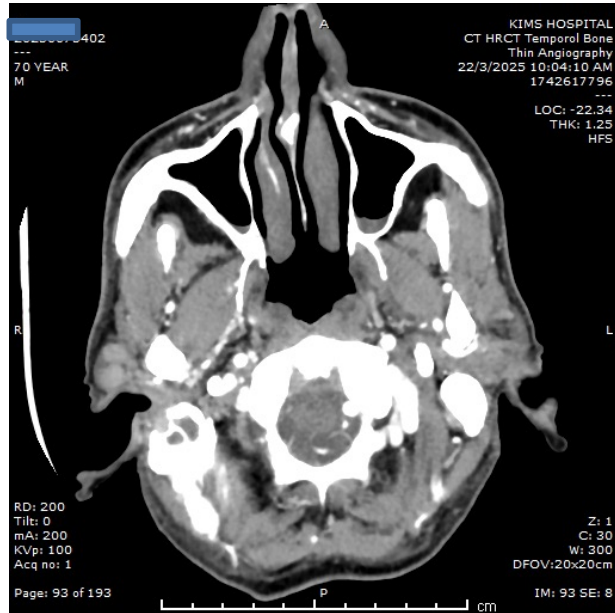
## LEFT







# Post-contrast study





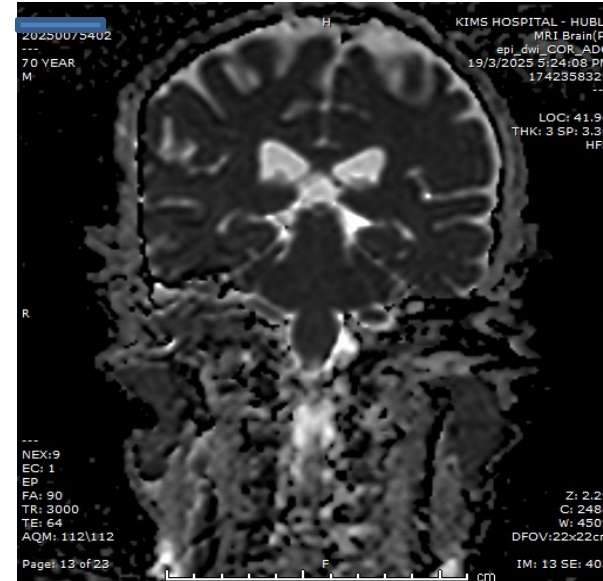
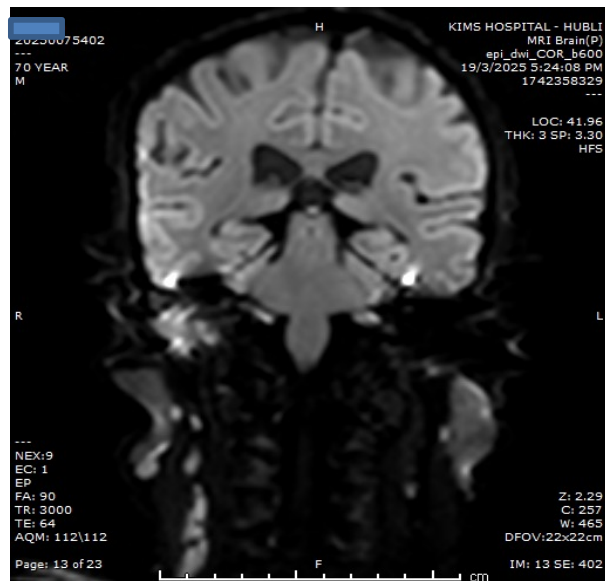
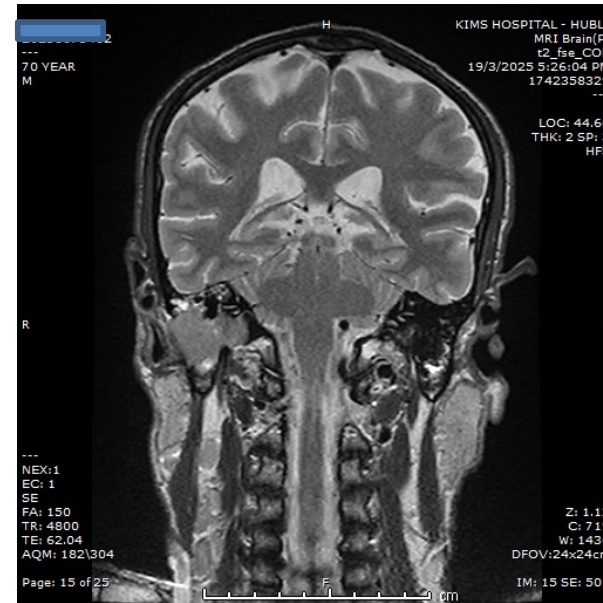
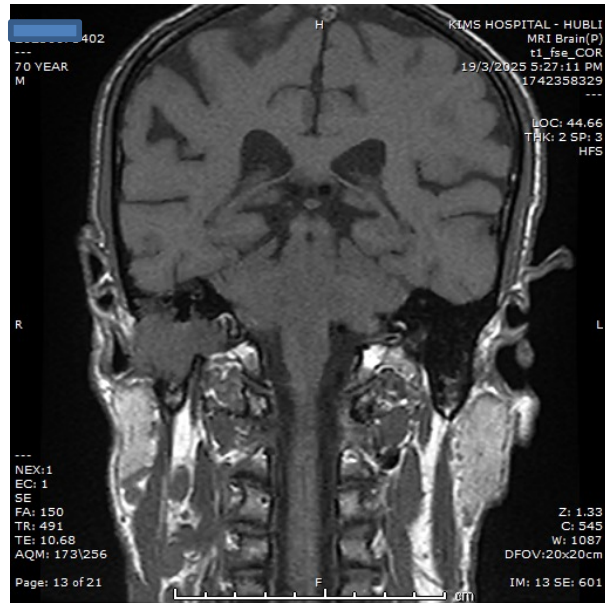
# CT FINDINGS:

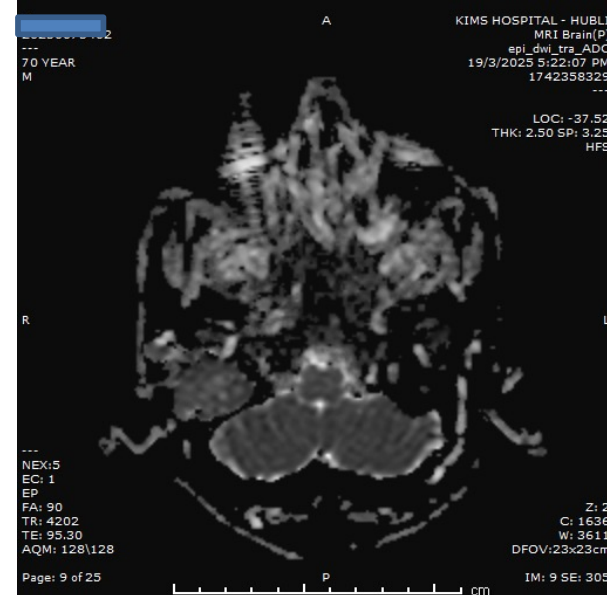
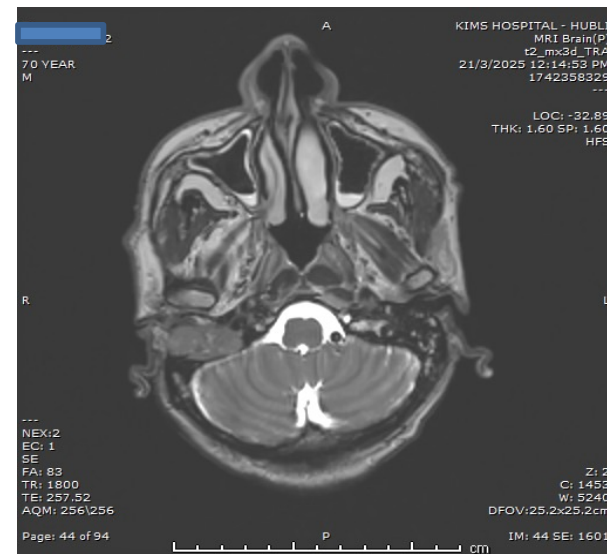
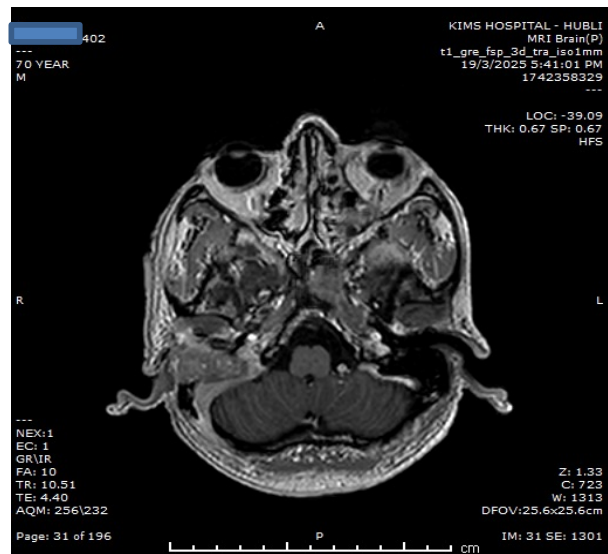
- Ill defined heterogeneous lesion of size 2.8x3.1x2.9cm along the right jugular fossa on the right side. It shows minimal enhancement on CECT with necrotic areas within. **Medially**, the lesion extend upto middle ear with erosion of semicircular canal. **Inferolaterally**, it extend upto mastoid tip. **Anteriorly**, it extend upto external auditory canal with narrowing of lumen. **Posteriorly**, eroding the posterior wall of mastoid with compression over sigmoid sinus.

## IMPRESSION

- ILL DEFINED HETEROGENEOUS LESION ALONG THE RIGHT JUGULAR FOSSA WITH MINIMAL ENHANCEMENT ON CECT WITH NECROTIC AREAS WITHIN WITH EXTENSION AS DESCRIBED ABOVE F/S/O **GLOMUS JUGULARE**.

# MRI Brain (Plain & Contrast)





# MRI BRAIN (PLAIN AND CONTRAST STUDY)

- Large T2/FLAIR hypointense lesion noted along the right jugular fossa with areas of salt and pepper pattern intralesionally. On post contrast showing homogenous enhancement reaching upto right basi temporal region along the intradural compartment.
- On CT correlation: ABOVE FEATURES LIKELY SUGGESTIVE OF RIGHT **GLOMUS JUGULARE** WITH EXTENSION AS DESCRIBED ABOVE



# HISTOPATHOLOGICAL REPORT

Features are suggestive of: **JUGULOTYMPANIC PARAGANGLIOMA**



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## LABORATORY OBSERVATION REPORT

UHID: 20250075402	Reg Date: 3/04/2025
Patient Name [REDACTED]	Age/Sex: 70YEARS/MALE
Department: ENT	HPR No: B-2131/25
Lab Name: PATHOLOGY COLLEGE LAB	Report Date: 22/4/2025

## HISTOPATHOLOGY REPORT

### SPECIMEN:

Specimen of 1) Lymph node from right upper jugulare group  
2) Right jugulare foramen

### GROSS:

Specimen sent in 2 labelled containers.  
Specimen from container 1) sent as right upper jugulare group consists of grey white to grey yellow tissue bits measuring 2x1x0.5cm.  
Specimen from container 2) sent as specimen from right jugulare foramen consists of multiple grey brown to grey yellow tissue bits largest measuring 2x1.5x1cm. Bony mass present. No lymph nodes dissected from both containers.

### MICROSCOPY:

Section studied from container 1) sent as lymph node from right upper jugulare group and container 2) sent as right jugulare foramen lesion, shows tumor cells arranged in organised pattern separated by fibrovascular septa. These cells are round to oval with vesicular nuclei, coarse clumped chromatin, prominent nucleoli and moderate amount of cytoplasm. Also seen are areas of fibrosis.

Container 2) also show bony tissue showing bony trabeculae which is unremarkable.

### IMPRESSION:

Features are suggestive of **JUGULOTYMPANIC PARAGANGLIOMA**.

*[Signature]*  
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