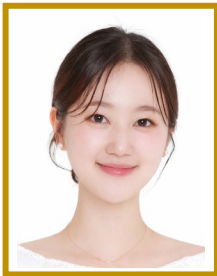


EP-095

점액낭종으로 임상적으로 오인된 하순의 혈관평활근종: 증례 보고

(Angioleiomyoma of the Lower Lip Clinically
Mimicking a Mucocele: A Case Report)



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Purpose: Angioleiomyoma is a benign smooth muscle tumor of vascular origin that is rarely encountered in the oral cavity. Because of its nonspecific clinical appearance, it is frequently misdiagnosed as common benign lesions such as mucocele. We report a case of angioleiomyoma of the lower lip that was initially suspected to be a mucocele and was confirmed by histopathological examination following surgical excision.

Methods: A 58-year-old female patient presented with an incidentally noted painless submucosal mass on the lower lip. The lesion was soft, well circumscribed, and covered by intact mucosa without ulceration or erythema, leading to a provisional diagnosis of mucocele (Figure 1). Excisional biopsy was performed under local anesthesia using 2% lidocaine with 1:100,000 epinephrine. An elliptical incision was designed around the lesion, and the mass was excised en bloc. Following excision, bilateral subcutaneous flap elevation was performed to achieve tension-free layered closure and preserve the contour of the lower lip.

Results: Gross examination revealed a pale gray soft tissue mass measuring less than 1 cm in diameter (Figure 2). Histopathological analysis demonstrated a benign vascular smooth muscle tumor composed of proliferating smooth muscle bundles surrounding vascular channels. These findings were consistent with angioleiomyoma (Figure 3). The postoperative course was uneventful, with satisfactory wound healing and preservation of lip symmetry. No functional impairment or recurrence was observed during follow-up.

Conclusion: Although uncommon, angioleiomyoma should be considered in the differential diagnosis of benign lower lip masses. Complete surgical excision provides both definitive diagnosis and excellent functional and cosmetic outcomes with a low risk of recurrence.



Fig. 1. Preoperative clinical photograph showing a localized submucosal mass on the lower lip.

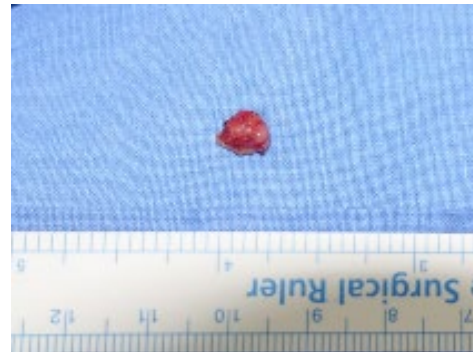


Fig. 2. Gross photograph of the excised specimen demonstrating a small, pale gray soft tissue mass measuring less than 1 cm in diameter.

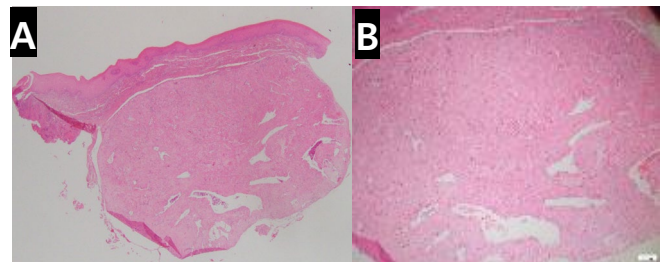


Fig. 3. Histopathological findings of the lesion.

(A) H&E stain, (x10) a well-circumscribed smooth muscle nodule with numerous thick-walled vascular channels. (B) H&E stain, (x40) showing smooth muscle bundles surrounding vascular structures, consistent with angioleiomyoma.

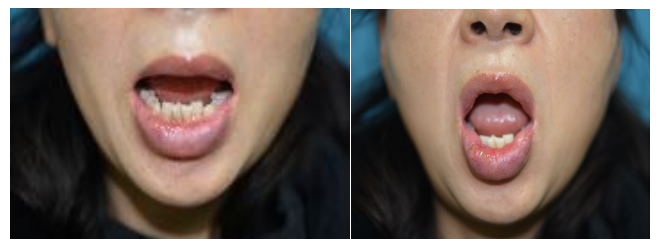


Fig. 4. Postoperative clinical photograph obtained at 6 months after surgery demonstrating satisfactory wound healing and preserved contour and symmetry of the lower lip without evidence of recurrence.