



SPONTANEOUS LINGUAL HEMATOMA IN A MIDDLE AGED WOMAN – A RARE ENTITY

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<p>Article Info <i>Received 15/11/2015</i> <i>Revised 28/12/2015</i> <i>Accepted 01/02/2016</i></p> <p>Key words: Spontaneous Bleeding, Lingual</p>	<p>ABSTRACT</p> <p>There have been case reports of spontaneous lingual hematomas in the elderly population with severe hypertension or an anticoagulation therapy. Spontaneous lingual hematoma is rare in middle aged adults without systemic hypertension or risk factors for bleeding. Here we present a case of a spontaneous lingual hematoma in a woman in the age of early fifties without diabetes mellitus, trauma, hematological disorders, hypertension, anticoagulant or thrombolytic associated therapies. The patient was given analgesics and recovered spontaneously within a week.</p>
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INTRODUCTION

Lingual hematoma is a rare entity without any previous associated trauma. Its spontaneous presentation is commonly described in patients on anticoagulation therapy [1,2]. There are some cases related to the tissue plasminogen activators (tPAs), accepted as a therapy for selected instances of acute ischemic cerebrovascular events, such as myocardial infarction, pulmonary embolism, portal vein thrombosis and deep venous thrombosis [3]. To the date, most of the reported cases occurred in elderly people with diabetes mellitus and hypertension [4]. The more frequent localization is the sublingual region with or without lingual affection. Sublingual hematoma is also known as pseudo-Ludwig phenomenon, and has a potential risk of upper airway obstruction leading onto emergency tracheostomy.

CASE REPORT

A 42 year old woman was attended to our OPD of our hospital with asymptomatic red swelling over the tongue.

The patient attributed it to tongue bite due to teeth bite suggesting a local trauma. She had no medical history of coagulation disorders or systemic hypertension, and did not complain about any difficulty in breathing. She complained about a foreign body sensation in the oral cavity and felt strange and anxious of its sudden onset. The blood pressure and other vitals were normal.

Oral cavity examination showed a lingual hematoma over the dorsal aspect of the tongue near the tip on the right side without affecting the floor of the mouth. The lesion was slightly painful on digital palpation and tense without fluctuation. ENT and Dental opinion was sought. ENT examination was normal. Dental examination revealed no sharp or malformed teeth. The blood tests parameters including platelet count and coagulation profile were within normal limits. Screening for autoimmune diseases was also normal. In the absence of airway compromise, the patient was reassured and was advised analgesic treatment. Hematoma resolved spontaneously within a period of 5 days.



Figure 1. Hematoma over the tip of the tongue on the dorsal aspect



DISCUSSION

Intraoral hematomas typically result from a local trauma (accidents, food, or trauma during tracheal intubation) in patients receiving anticoagulation therapy. The spontaneous presentation without traumatic event is a rare entity, and is thought to happen due to aneurysmal changes in the facial or lingual arteries [4]. Elderly patients with diabetes mellitus, arterial hypertension, anticoagulation therapy with warfarin [1,2], thrombocytopenia induced by heparin [5], or thrombolytic therapy as tenecteplase [3], have an increased risk of rupture of these aneurysms.

Laboratory studies including a complete blood count and coagulation profile must be performed. In some cases a computed tomography might be necessary and could reveal an anomalous vessel or active bleeding⁽⁴⁾. Hematoma management is usually supportive with subsequent decrease in the hematoma size. The treatment includes control of the blood pressure and correction of coagulation disorders (anticoagulation therapy reduction, administration of fresh frozen plasma or intravenous vitamin K). Surgical drainage of the hematoma is generally not indicated [3], unless over infection appears or it does

not spontaneously resolve after the correct airway management. This patient is an infrequent occurrence of lingual hematoma presentation. She does not present any risk factors for bleeding, has normal blood pressure and blood tests were within normal limits. It is unknown if the patient had an acute elevation of the blood pressure or aneurysmal changes in the lingual artery. Due to spontaneous resolution of her symptoms within few days, the patient did not require any additional study.

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CONFLICT OF INTEREST

The authors declare that they have no conflict of interest.

STATEMENT OF HUMAN AND ANIMAL RIGHTS

All procedures performed in human participants were in accordance with the ethical standards of the institutional research committee and with the 1964 Helsinki declaration and its later amendments or comparable ethical standards. This article does not contain any studies with animals performed by any of the authors.

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