

Adenoid Cystic Carcinoma of the Parotid in a Developing Community

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ABSTRACT

The adenoid cystic carcinoma is a singularly well named malignancy. Thus, it was recognizable in the breast far back in 1881. Curiously, in albino skins, where the squamous variety holds sway, it has been reported on personally. Therefore, although it is held to spread slowly into adjacent tissues, its occurrence among the Igbo ethnic group in Nigeria is deemed worthy of documentation with special reference to the worldwide age patterns.

Keywords: Adenoid cystic carcinoma, History, Age, Epidemiology, Developing community

INTRODUCTION

The strikingly well named adenoid cystic carcinoma is worthy of research. In fact, so recognizable was it back in 1881 that I was able to draw attention to it [1]. In the words of Evans [2], this carcinoma tends “to spread slowly into the adjacent tissues.” A documented local example concerned a colonic case involving a surgeon who survived extirpation and is well in his 80s [3]. Accordingly, with reference to the Igbo ethnic group [4], research on its involvement of the parotid gland is deemed worthy of documentation.

INVESTIGATION

A Birmingham (UK) group proposed that the establishment of a histopathology data pool facilitates epidemiologic analysis [5]. In this context, the author in 1970 became the pioneer head of such a data pool established by the then Government of the Eastern Region of Nigeria at the Capital City, Enugu. Having encouraged the local physicians to send biopsy materials complete with epidemiologic data, I amassed materials whose copies I kept personally. For this study, the chosen organ was the parotid. It requires tabulation as to the data on the diagnosed adenoid cystic carcinoma.

RESULTS AND DISCUSSION

The age range was from 24 to 75 years (mean 44.7 years). The Tunisian patient was similar in that the age was 47 years [6].

In the Turkish patient, the girl was aged only 14 years [7]. From India, the 29 year old male was also younger than the local case [8]. The Italian report generalized that those less than 50 years fared better [9] (**Table 1**).

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Table 1. Epidemiological analysis of parotid adenoid cystic carcinoma.

No.	Initials	Age	Sex	Provisional diagnosis
1	OC	33	M	Tumor
2	AI	46	F	Adenocystic carcinoma
3	IM	36	M	Pleomorphic adenoma
4	IS	40	F	Cancer
5	AP	24	M	Pleomorphic adenoma
6	AF	65	M	Mixed tumor
7	ON	50	M	Carcinoma
8	NR	50	F	Mucorepidermoid carcinoma
9	AN	75	F	Basal cell carcinoma
10	AL	28	F	Carcinoma

CONCLUSION

Older age groups were involved in reports from Japan [10], India [11] and Chile [12]. This was not the case in this developing community. Moreover, the male/female ratio was 1:1. Therefore, these data are deemed to be contributions to the epidemiology of parotid cystic adenoid carcinoma even if only one case was correctly diagnosed provisionally. Incidentally, carcinomas accounted for most other lesions, while 2 cases were suspected as being benign.

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