*Regeneration, Reconstruction & Restoration* **Images**

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# An Exophytic Mass of the Lower Labial Mucosa

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## 1. Case report

A 60-year-old female was referred to a private dental clinic with a painless exophytic mass of the lower labial mucosa, measuring 1 cm in diameter (Figure 1). Intraoral examination revealed a circular, well-defined, mobile, submucosal nodule. It was slow-growing, and the patient reported its presence from 10 years ago. Her past medical history was unremarkable. The extraoral examination did not show any abnormal condition.
What is your diagnosis?

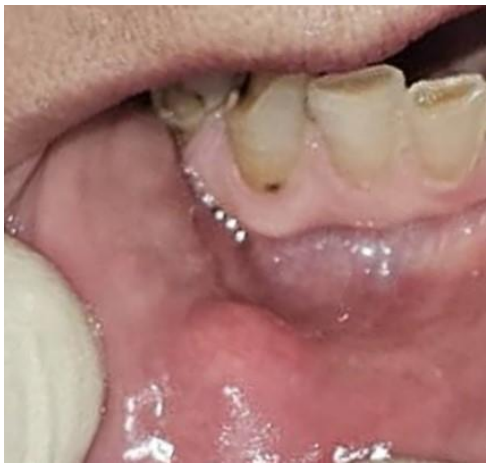

**Figure 1.** A smooth-surfaced, pink nodular submucosal mass of the lower labial mucosa.

## 2. Discussion

With the provisional diagnosis of mucocele and benign mesenchymal tumor, an excisional biopsy was performed (Figure 2). The gross showed a yellow encapsulated mass. The microscopic sections displayed mature adipose tissue that entrap the minor salivary gland with acinar necrosis, dilated ducts, and infiltration of chronic inflammatory cells (Figure 3).
The histopathologic features in combination with the clinical findings were consistent with the diagnosis of sialolipoma. Oral lipoma is a known entity, nevertheless, intraosseous variant or lipomatous tumors containing salivary glands (Sialolipoma) are rare (1-3). It shows a well-circumscribed mass surrounded by a fibrous capsule, composed of tumoral mature fatty tissue and non-neoplastic salivary gland features (3). Dense lymphoid infiltration, obvious ductal dilatation, fibrosis, and myxoid alteration in adipose tissue have also been described (1). The clinical and microscopic characteristics of this neoplasm are not familiar to oral pathologists (3). Sialolipomas of major salivary glands show

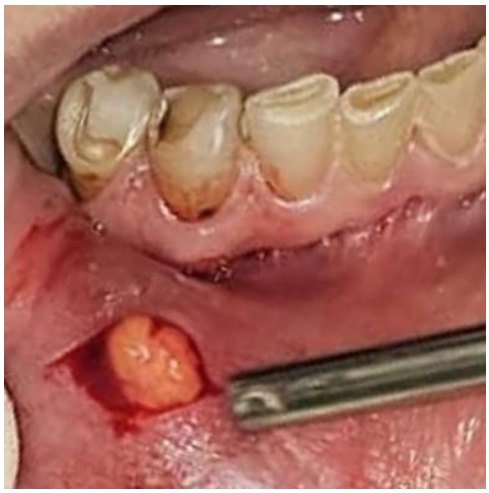

**Figure 2.** Note the yellow mass that is being exposed at the time of surgery.

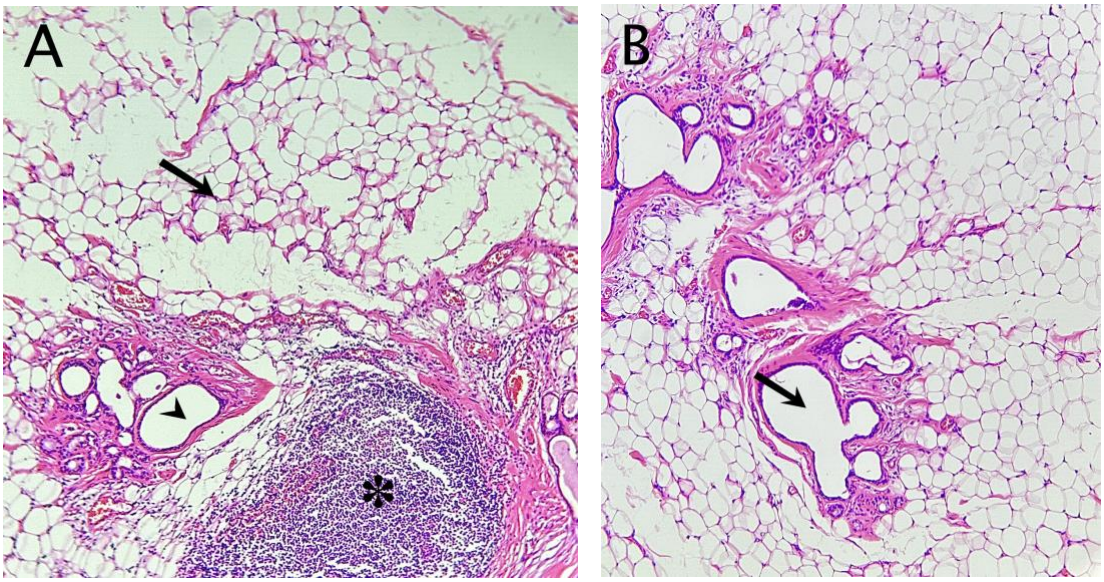


**Figure 3.** Histolopathologic sections show: (A) Mature adipose tissue (black arrow), salivary gland ducts (arrow head), and lymphoid aggregate (asterisk) (H & E×100), (B) Mature adipose tissue and salivary gland dilated ducts (black arrow) (H & E ×100).

an adult tendency with no gender predilection. However, minor salivary gland sialolipoma affects older patients with a female propensity. The most common site in the minor salivary gland is the palate, followed by buccal mucosa, and clinical differential diagnosis is primarily related to the lesion location (4). Reported duration varies from 2 months to 10 years (1). The proposed possible mechanism includes salivary gland dysfunction, which leads to the replacement of fat and atrophy of salivary elements (4). These features were also evident in the microscopy of the present case. Conservative surgical excision is the treatment of choice. The prognosis is excellent without any recurrence (5). Herein, we report a rare variant of lipoma in an unusual site.

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## Using artificial intelligence (AI)
No artificial intelligence–based tools were employed in any stage of this research (i.e., study design, analysis, manuscript preparation, etc.).

## Author contributions
Saede Atarbashi-Moghadam: Conceptualization, Writing – Review & editing
Ali Lotfi: Supervision, Project administration, Writing – Review & editing
Bahram Ardalani: Writing – Original draft, Writing – Review & editing

## Conflict of interest
The authors declare no conflict of interest.

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