

THE JOURNAL OF THE IRISH HEAD AND NECK SOCIETY

Title: Incidence and Predictors of Occult Lymph Node Metastasis in Clinically N0 Head and Neck Cancer

Body: Objective: To determine the incidence of occult lymph node metastasis in patients with clinically N0 head and neck cancer undergoing elective neck dissection. Method: Fifty patients of varying ages and both sexes, all with biopsy-confirmed head and neck cancer and a clinically N0 neck, were included. Each patient underwent elective neck dissection and primary tumor excision. Lymph nodes from each dissection were examined microscopically, and histopathology results were documented to identify the proportion of occult metastasis and primary tumor sites with higher occult risk. Results: Out of 50 patients (39 males, 11 females; mean age 46, range 22-72), the most common primary tumor sites were buccal mucosa (40%) and tongue (32%), followed by lower alveolus (14%), larynx (12%), and lip (2%). Occult nodal metastasis was detected in 12 patients (24%). Occult metastasis rates by primary site were as follows: buccal mucosa (25%), lower alveolus (28.57%), tongue (25%), and larynx (16.66%). All metastases were found on the ipsilateral side of the neck. Overall, 24% of all clinically N0 primaries had occult nodal metastases detected on histopathology, with 12 patients (24%) upstaged from clinically N0 to histopathologically N+. The negative predictive value of clinical examination was 76%. Out of the 50 patients, 39 had no complications, while 11 had some complications. During one year of follow-up, four patients experienced recurrence (3 ipsilateral, 1 contralateral).

Authors: DR VISHWADEEP KHIDIYA

Affiliations: DR S N MEDICAL COLLEGE , JODHPUR