

Palmar Pain: A Case Report on Digital Nerve Schwannoma

¹Nadiya H; ^{1,2}Nur Ayuni KA; ^{1,2}SN Amirah Alsagoff; ^{1,2}Reza A; ³Rahul L

¹Department of Orthopaedic & Traumatology, Hospital Al-Sultan Abdullah UiTM, Puncak Alam, Selangor.

²Department of Orthopaedic & Traumatology, Faculty of Medicine, UiTM Sungai Buloh Campus, Selangor.

³Department of Orthopaedic, Hospital Sultanah Aminah Johor Bharu, Johor.

INTRODUCTION:

Schwannoma is a benign peripheral nerve tumor that usually occurs on the large nerve trunks in the upper limb. We report a rare case of schwannoma arising from the palmar digital nerve.

REPORT:

A 31-year-old dentist presented with a mass on mid-palmar of her dominant hand for 20 years. Initially, it was painless but became progressively painful over the past 2 years. She denied constitutional symptoms.

On examination, there was an oval bluish mass on flexor zone III of right hand measuring 1 cm x 2 cm. It was tender, firm, superficial and well-demarcated. The mass became immobile on finger hyperextension. Tinel sign was negative.

The MRI of right hand revealed well-defined, multilobulated lesion in the subcutaneous tissue. It was isointense on T1-weighted image and hyperintense on T2-weighted image. It was not suppressed by STIR and not significantly enhanced post gadolinium. Differential diagnosis includes giant cell tumor of tendon sheath or cystic lesion.

She underwent excision biopsy of the mass. Intraoperatively, there was an oval-shaped encapsulated soft tissue mass firmly attached to palmar digital nerve of middle finger. Careful enucleation was done to protect the nerve. Histopathological examination findings confirmed the diagnosis with the presence of Verocay bodies and areas of Antoni A and B tissue types.

The patient had transient paresthesia of right middle finger, which resolved after 6 weeks. The wound healed well.



Figure 1: Clinical images; preoperative (left) and intraoperative (right).

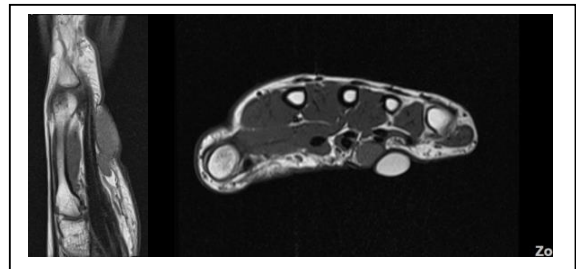


Figure 2: MRI of right hand in saggital (left) and coronal view (right).

CONCLUSION:

Schwannoma can be easily misdiagnosed as giant cell tumor of tendon sheath or cystic lesion even with the aid of advanced imaging. Therefore, the possibility of a schwannoma diagnosis should be kept in mind. Careful dissection is crucial, and the use of microscopic magnification is advised to avoid damaging the nerve fibers during the dissection.

REFERENCES:

1. Kütahya H et al. Schwannoma of the median nerve at the wrist and palmar regions of the hand: a rare case report. *Case Rep Orthop.* 2013;2013:950106.