ADULT SOLITARY MYOFIBROMA IN THE WRIST WITH MEDIAN NERVE COMPRESSION

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Introduction: Myofibroma is a benign proliferation of myofibroblasts in the connective tissue. It typically occurs in the skin and subcutaneous tissues of the head and neck in infants and children younger than 2 years, with two thirds present at birth. Solitary myofibroma in the limbs are very rare especially in an adult. We report a case of adult myofibroma with median nerve neuropathy.

Discussion: A 16-year old female presented to our clinic with a mass over her left wrist. She complained of numbness and tingling in the median nerve distribution and pain upon wrist and finger motion. Physical examinations showed a bluish tinged mass in the volar radial side of her wrist sized about 5cm x 4cm with a positive Tinel's sign. The mass was firm, tender upon palpation and was not pulsatile. Ultrasound imaging showed a well-defined heterogenous hypoechoic, highly vascularized mass with irregular margin suggestive of giant cell tumor or hemangioma. MRI showed a well circumscribed rounded mass adjacent to the flexor tendons, compressing the median nerve, suggestive of an infected or bleeding ganglion cyst or soft tissue hemangioma. Through modified Henry approach and an extended carpal tunnel incision, a marginal excision biopsy was done. The median nerve was found compressed and pushed aside by a tumor arising from the pronator quadratus muscle. The tumor was removed en bloc. The histopathology report showed plump myofibroblast arranged in short fascicles with cellular areas arranged around thin-walled branching ectatic pericytomatous vessels in the centre. The final histological diagnosis was benign myofibroma, which was stained positive for smooth muscle action (SMA) and negative for desmin.

Conclusion: Although solitary myofibroma in adult is rare, it can be considered in the differential diagnosis in adults presenting with lesions in the limb and surgical excision is the treatment of choice as recurrence is uncommon after complete resection.