Papillary cystadenoma of the lacrimal caruncle

C. H. GREER

Royal Victorian Eye and Ear Hospital, Melbourne, Australia

The following case is presented as an additional example of papillary cystadenoma of the lacrimal caruncle.

Case report

A 68-year-old white woman presented with an irritable and slightly enlarged left caruncle. What was clinically described as a pedunculated caruncular papilloma was excised and sectioned.

Microscopic appearances Sections showed part of a spherical cystadenoma situated immediately beneath the surface epithelium of the caruncle (Fig. 1).

FIG. 1 *Low-power view of papillary cystadenoma of the caruncle. Haematoxylin and eosin $\times 18$*

The adenoma, which was sharply circumscribed but not encapsulated, consisted in part of radially-orientated, slender, anastomosing papillary processes clothed by double-layered eosinophilic epithelium (Fig. 2). The basal cells of this epithelium were polygonal and relatively small with round nuclei, while the surface cells were tall and cylindrical in shape with conspicuous cell boundaries, granular eosinophilic cytoplasm, and oval nuclei lying near the free borders of the cells (Fig. 3).

FIG. 2 Higher magnification of the papillary processes, with inconspicuous fibrous tissue cores. Haematoxylin and eosin $\times 75$

Some of these cells contained mucus. The inconspicuous connective tissue stroma of the growth was sparsely infiltrated by lymphocytes. Other areas of the adenoma were more compact and exhibited tubules and acini containing blobs of mucus. The tumour had not been completely removed.

FIG. 3 Papillary processes clothed by characteristic double-layered epithelium. Haematoxylin and eosin $\times 180$

Comment

The epithelial component of this adenoma is strikingly similar to that seen in adenolymphomata of the parotid gland. Adenolymphomata (papillary cystadenoma lymphomatosum, Warthin's tumour) are benign tumours occurring predominantly in the substance

of, or in close relation to, the parotid gland. They are made up of characteristic double layered eosinophilic epithelium clothing richly cellular lymphoid stroma. Azzopardi and Hou (1964) have provided striking proof of the validity of the prevailing belief that adenolymphomata originate from salivary duct epithelium incorporated in lymph nodes adjacent to, or embedded in, the parotid gland.

Tumours of identical or very similar structure occasionally arise from minor salivary glands in the larynx (Heinz, 1951) and oral cavity (Veronesi and Corbetta, 1960; Goldmann, 1967; Stuteville and Corley, 1967) or from the minor lacrimal glands of the caruncle (Mackenzie and Patience, 1959; Oaks and Jenson, 1963; Forbes and Crawford, 1963). Coats (1912) reported a case which he called spiradenoma papilliferum cysticum on the mistaken assumption that it arose from a sweat gland. In extraparotid cystadenomata the characteristic lymphoid stroma may be scanty or absent and the usual fibrous capsule may be missing. No report of an adenolymphoma of the major lacrimal gland has yet appeared.

Summary

A papillary cystadenoma of the lacrimal caruncle in a woman aged 68 years is reported. The growth probably originated in accessory lacrimal glands.

References

- AZZOPARDI, J. G., and HOU, L. T. (1964) *J. Path. Bact.*, **88**, 213
 COATS, G. (1912) *Roy. Lond. Hosp. Rep.*, **18**, 269
 FORBES, G. B., and CRAWFORD, R. A. D. (1963) *Brit. J. Ophthalm.*, **47**, 177
 GOLDMAN, R. L. (1967) *Amer. J. clin. Path.*, **48**, 49
 HEINZ, I. (1951) *Aust. N.Z. J. Surg.*, **21**, 47
 MACKENZIE, J. R., and PATIENCE, C. R. (1959) *J. Path. Bact.*, **78**, 288
 OAKS, L. W., and JENSON, M. B. (1963) *Amer. J. Ophthalm.*, **56**, 459
 STUTEVILLE, O. H., and CORLEY, R. D. (1967) *Cancer (Philad.)*, **20**, 1578
 VERONESI, U., and CORBETTA, L. (1960) *Acta oto-laryng. (Stockh.)*, **52**, 1