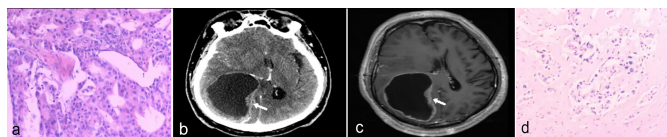


# Recurrence of Submandibular Adenocarcinoma with Intracranial Metastasis as the First Symptom

Sir,

A 40-year man presented to our clinic due to left limb dysfunction. Four years ago, the patient underwent resection of left submandibular adenocarcinoma and postoperative chemotherapy (docetaxel + cisplatin + tegafur/gimeracil/oteracil/potassium). The pathological diagnosis was poorly differentiated adenocarcinoma of the left submandibular gland, and cancer cells were detected in 2/5 of the deep cervical lymph nodes (Figure 1a). Computed tomography showed a low-density space-occupying lesion on the right parietal lobe (Figure 1b). Magnetic resonance imaging showed a cystic ring-enhanced lesion on the same site (Figure 1c). A puncture pathological examination was performed; the immunohistochemistry results were as follows: CK7+, CK20-, CK5/6-, TG-, CD30-, vimentin-, TTF-1-, napsin A-, ALK-, and P63-. Poorly differentiated metastatic adenocarcinoma was observed in the tissue (Figure 1d). Although the disease was in an advanced stage, the patient refused surgery and only accepted radiotherapy. Hence, the patient was transferred to the oncology department to continue the treatment. At present, the patient is still alive but has lost self-care ability.



**Figure 1:** (a) Pathological results after resection of the left submandibular adenocarcinoma show a moderately differentiated adenocarcinoma. (b) Computed tomography image shows a low-density lesion in the right parietal lobe. (c) Magnetic resonance imaging (MRI) image shows a right parietal lobe cystic annular enhancing mass. (d) Pathological findings from the targeted puncture show a poorly differentiated metastatic adenocarcinoma.

The frequency of malignant salivary gland neoplasms was low in Chinese population, ranging from 0.9 to 2.6 cases per 100,000 individuals.<sup>1</sup> Metastasis of submandibular adenocarcinoma to the brain is a very rare occurrence. Intracranial metastases should be considered in patients with history of submandibular adenocarcinoma who present with neurological and functional impairments and hence, an MRI examination is highly recommended.

## COMPETING INTEREST:

The authors declared no competing interest.

## AUTHORS' CONTRIBUTION:

DL: Design of the article, collection of clinical data, writing and revising the manuscript.

YW: Data sorting, analysis and further revision.

All authors approved the final version of the manuscript to be published.

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