

## Anterior Cervical Mass Revealing a Laryngeal Squamous Cell Carcinoma

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We report the case of a 56-year-old male patient, an active chronic smoker for the past 20 years with no history of cessation, who presented to the emergency department with a progressively enlarging, rounded, fixed and painless anterior cervical mass located below the hyoid bone. The mass measured approximately 15 cm in diameter, was hard in consistency and was associated with progressive symptoms of dyspnea, dysphagia and dysphonia, significantly impairing his quality of life. Clinical examination revealed a large, immobile cervical swelling with signs of upper airway compromise.

A contrast-enhanced cervical CT scan demonstrated a supraglottic laryngeal tumor with destruction of the thyroid cartilage and extension into the adjacent cervical soft tissues, consistent with a T4a lesion, along with bilateral locoregional lymph node involvement (N2c).

An urgent tracheostomy was performed to secure the airway (**Figures 1 and 2**) and a biopsy obtained under direct laryngoscopy confirmed a moderately differentiated, keratinizing and infiltrating squamous cell carcinoma of the larynx.



**Figure 1:** Anterior cervical mass measuring approximately 15 cm in diameter.



**Figure 2:** Axial CT scan at the level of the thyroid cartilage showing a laryngeal mass narrowing the airway lumen (yellow arrow), with thyroid cartilage lysis (blue arrow) and invasion of the anterior cervical soft tissues (red arrow).