

## The Examination:

The specialist will need to examine the neck itself and also the face, scalp, nose and mouth. The inside of the throat is more difficult to examine and in the past this was usually done by placing an angled mirror at the back of the mouth. Now it is more common to use a fine flexible endoscope (telescope) which is gently passed through a nostril to the back of the nose. You may need a spray of a local anaesthetic into the nose which causes a little irritation, but the procedure should not be uncomfortable.

## Investigating the Lump:

One common way to reach a diagnosis is to remove some tissue from the lump itself. This may be done by carefully passing a very fine needle through the skin into the lump, removing some cells and looking at them through a microscope. Again this should produce only minor discomfort. This minor procedure may be carried out in the neck lump clinic or in the X-Ray department where a specialist doctor may use an ultrasound probe on the outside of the neck to guide the needle. It may take a few days for the tissue sample to be analysed and the doctor may also order some blood tests, X-rays or special scans of the neck in the meantime if needed. Occasionally in spite of all these investigations it is impossible to achieve an accurate diagnosis. If the doctor is still concerned that the lump has suspicious features, it may have to be removed so that the whole lump can be analysed.

Rest assured that your symptoms and/or lumps will be taken seriously and investigated appropriately. If you have any specific fears or concerns it is very important to write these down and mention them to the doctor- there is no need to be afraid or embarrassed and the doctor will always appreciate hearing your thoughts. Bringing a partner or trusted friend to clinic can help make the best of the experience in an often stressful and busy atmosphere. It is very important not to ignore a neck lump, which may lead to delaying urgently-needed treatment with potentially serious consequences.

# ABOUT NECK LUMPS

By Chris Milford

ENT-UK is the professional Association for British Ear, Nose and Throat Surgeons and related professionals. This leaflet provides some background information about neck lumps. It may be helpful in the discussions you have with your GP or specialist when deciding on possible treatment. This information leaflet is to support and not to substitute the discussion between you and your doctor. Before you give your consent to the treatment, you should raise any concerns with your GP or specialist.

*If you have any problems or questions, please contact:*

*Please insert local department routine and emergency contact details here*



ENT.UK

The Royal College of Surgeons of England  
35-43 Lincoln's Inn Fields  
London WC2A 3PE

**Disclaimer:** This publication is designed for the information of patients. Whilst every effort has been made to ensure accuracy, the information contained may not be comprehensive and patients should not act upon it without seeking professional advice.

Last updated: November 2010 - Review due: November 2012

# Introduction

Finding a lump in the neck can cause considerable anxiety and worry. If a neck lump is found, it is sensible to seek medical advice from your Doctor. The neck contains a wide variety of structures and therefore there are a large number of different causes for lumps or swellings to appear.

A medical consultation with a thorough examination and perhaps some simple investigations will usually lead to a clear diagnosis. In some cases early treatment may be important to prevent serious consequences, and persistent or growing neck lumps should never be ignored. Any lump in an adult which, remains for more than two to three weeks, should be investigated thoroughly, often in a specialist clinic or hospital.

## What is causing this lump?

### Infection:

Perhaps the commonest reason for a newly-discovered lump is infection of the upper airways. The viruses and bacteria causing colds and sore throats will also lead to inflammation of the lymph glands of the neck, and these may be tender and swollen for a couple of weeks. For this reason doctors will often wait for the inflammation to settle. They may prescribe antibiotics before investigating a lump any further. In children and younger people these infections are very common and it is rare to find a serious underlying cause for a neck lump. A variety of infections can cause persisting lumps, most commonly viruses such as glandular fever, mumps or even (in some high risk groups) HIV. Tuberculosis (TB) is much rarer today, but is still found in those without childhood immunity; TB-like organisms can also cause large neck lumps in children who are apparently well.

### The Thyroid Gland:

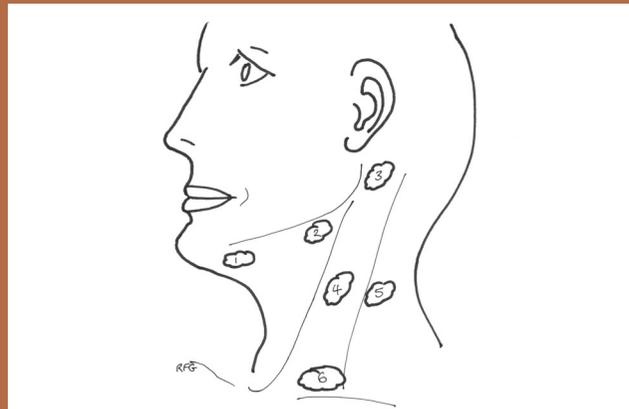
Low in the neck is the Thyroid gland, which may swell (causing a “goitre”) or contain lumps which are usually benign in nature. Thyroid cancers tend to have a very good prognosis, but early diagnosis and treatment in a specialist clinic is essential. Some people are born with cysts associated with the Thyroid gland but higher in the neck, which may become infected and get bigger later in life. Similar cysts may be found in other parts of the neck and will need to be removed if they are causing troublesome symptoms.

### The Salivary Glands:

High in the neck there are two pairs of glands which make saliva. Inflammation or blockage of the salivary duct can cause painful neck lumps. If the salivary duct is blocked, the gland may swell up during eating.

### Other Structures:

Some lumps felt in the neck may simply be normal structures which are present in everyone but more prominent in some. For example the glands producing saliva, bones of the vertebral column or cartilages of the voice-box may be mistaken for an abnormal lump, particularly if they are different on one side compared to the other and seem more prominent on one side of the neck. In these cases a careful examination by an experienced doctor will frequently be enough to give reassurance.



## Is this lump a cancer?

Cancerous lumps in glands of the neck are increasingly common with age and often associated with heavy use of tobacco and/or alcohol. The cancer has usually started in the mouth or throat and tends to spread to the neck long before elsewhere in the body. It is therefore very important to diagnose and treat early before the disease has spread further than the neck, making successful treatment much less likely. Cancerous lumps tend to be firm but not painful and grow gradually in size over weeks or months. There may be other symptoms related to cancer, such as weight loss or changes in speech, swallowing or breathing.

## What can the specialist do to help me?

The purpose of seeing a specialist is to obtain the correct diagnosis and start the required treatment (if any) as soon as possible. Many hospitals have neck lump clinics. In the UK these clinics are usually run by Ear Nose and Throat Surgeons, but General and Maxillo-Facial Surgeons may also be involved. A careful evaluation includes questions about the lump itself but also changes in voice, swallowing, breathing, appetite and weight. You will be asked about fevers, night sweats, pain in the throat or ear, hearing loss, mouth ulcers, dental problems and blockage of the nose.

Think carefully about whether you have had any of these symptoms in the recent past. It is very important that you are frank about use of tobacco and alcohol, as their use is closely linked to serious disease in the head and neck region, particularly cancers. You will also be asked about previous serious illnesses and operations, any family medical history and recent foreign travel.