International Conference 2025

28th - 29th November 2025

Recurrent Malignant Fibrous Histiocytoma of the Neck: A Challenging Case of Progressive Airway-Adjacent Sarcoma With Successful Functional Recovery

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Abstract:

Background: Malignant fibrous histiocytoma (MFH), now classified under undifferentiated pleomorphic sarcoma, is a rare soft-tissue sarcoma that infrequently occurs in the head and neck region. Local recurrence is common, particularly following incomplete surgical resection. Masses in the neck pose a unique diagnostic and management challenge due to proximity to vital neurovascular and airway structures.

Case Presentation: A middle-aged male farmer, non-smoker, presented with a progressively enlarging left-sided neck mass, initially noted in 2016 and surgically excised in 2018. The lesion recurred and was incompletely excised in 2024 at a peripheral centre. Over three months in 2025, the mass grew aggressively, associated with weight loss, generalised body weakness and inability to move his head causing significant limitation in neck mobility, although the patient remained able to speak and maintain airway patency.

Examination revealed a firm, immobile, non-tender 10 × 8 cm mass. Radiology demonstrated a 12 × 22 × 17 cm mass inseparable from the sternocleidomastoid muscle weighing approximately 3kg. Histology confirmed malignant fibrous histiocytoma. The patient underwent wide local excision with drain placement and required postoperative blood transfusions. Physiotherapy was initiated early postoperatively to aid recovery of nec movement

Discussion: This case highlights the importance of early specialist referral, thorough oncologic planning, and the consequences of incomplete tumour excision. The case also emphasises neck mass red flags relevant to acute and emergency medicine.

Outcome: The patient recovered well post-operatively with full neck range of motion and returned to normal activities of daily living. Physiotherapy was required post-op to regain mobility. He remains under surveillance with no evidence of recurrence to date.

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Conclusion: This case underscores the need for aggressive surgical management of recurrent neck sarcoma, multidisciplinary care, and heightened awareness in acute settings given recurrence. Early identification and referral can significantly improve outcomes.

Key Learning Points:

- · Recurrent neck masses warrant urgent specialist review and oncologic imaging.
- Incomplete excision significantly increases recurrence risk.
- Multi-disciplinary approach and physiotherapy optimise functional outcomes.