Abstract:

Acquired paediatric neck masses constitute a diagnostic challenge. Their pattern is important in formulating management protocol. Reports from developing countries including Kenya are scarce. This study describes the causes, location, clinical features and gender distribution of these masses in a Kenyan paediatric population. This prospective cross-sectional study was carried out in a regional Eastern and Central African referral centre in Kenya. Children aged 16 years and below with neck masses, who presented to various clinics and wards in a 5 month period were examined. One hundred and eighty four of 235 masses (78%) were acquired. Inflammatory cases were the most common (64%), followed by malignant neoplasm (32%). The most common inflammatory cases were abscesses, reactive lymphadenopathy and tuberculous adenitis. They mainly involved upper cervical and submandibular lymph nodes and were more prevalent in those aged less than 4 years. Lymphomas were the most common malignant masses (42%). Malignant masses were widespread in location; non-tender, and most frequent in those aged 4-8 years. In conclusion, inflammatory conditions consistent with upper airway infection cause most acquired paediatric neck masses, but malignant neoplasms constitute a significant proportion. Prudent management of infection and early confirmation of diagnosis are recommended.