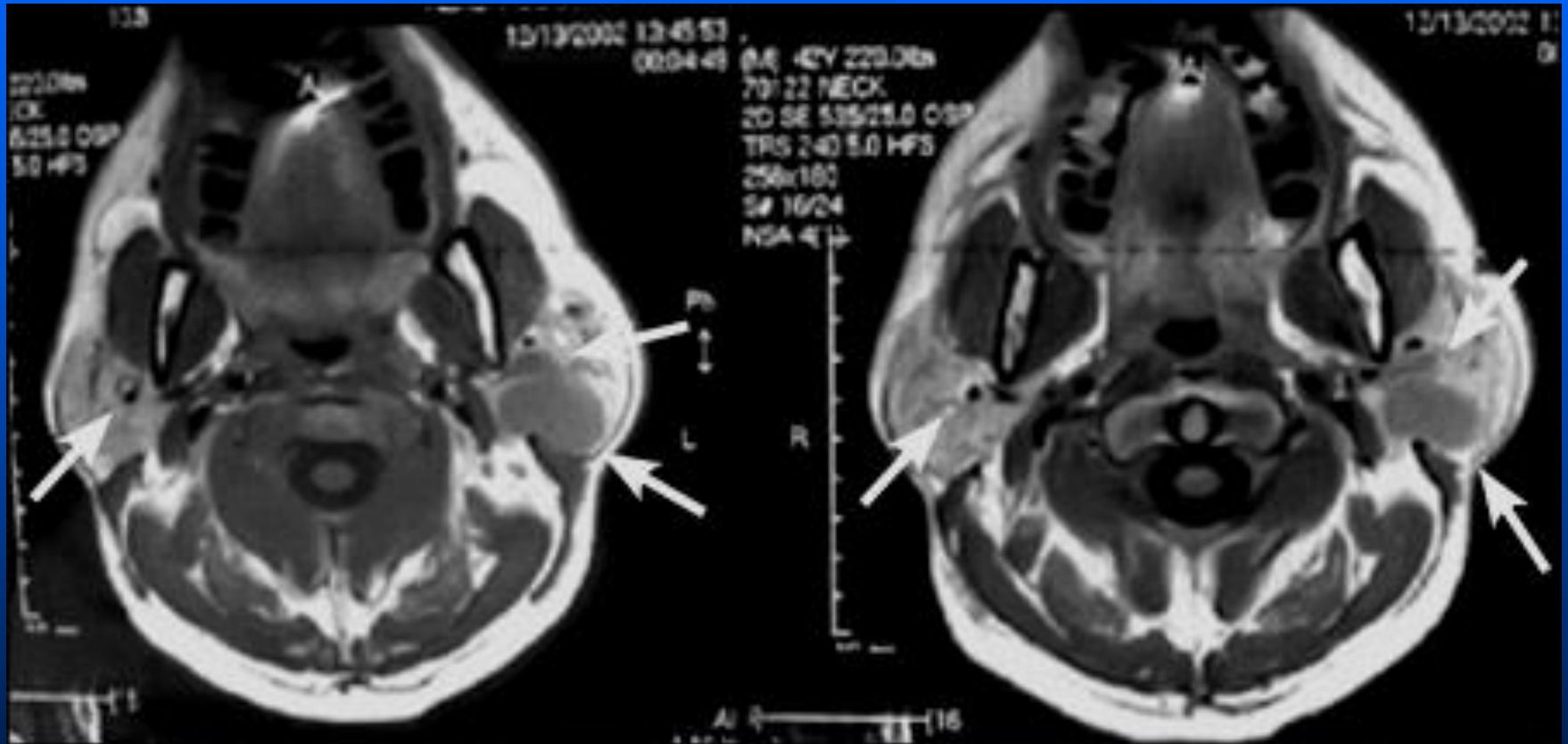
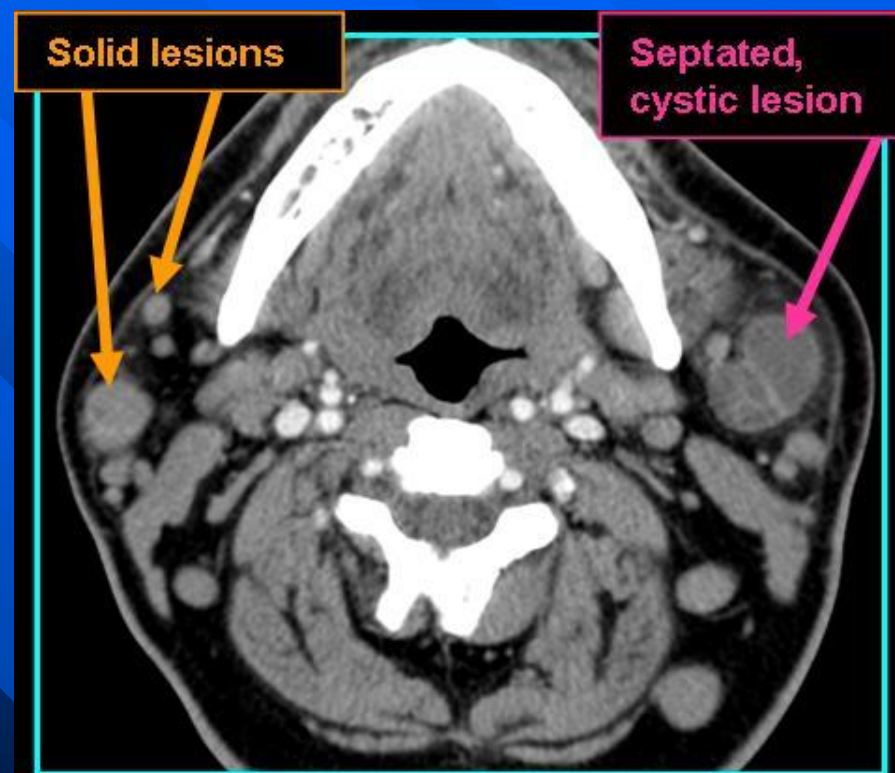


# Benign lymphoepithelial lesions

- Mixed solid and cystic lesions that enlarge the parotid glands,
- Usually associated with cervical lymph node enlargement, and nasopharyngeal lymphofollicular hyperplasia.
- usually in HIV positive patients without AIDS, and are not an AIDS defining illness.
- It is relatively common in the HIV population, with 5% of patients eventually developing BLL.
- Commonly arise in the parotid gland, and are only rarely seen in the submandibular glands or sublingual glands.

# Benign lymphoepithelial cysts in HIV (can have nodules too)





## Cystic lesions in the salivary glands

- Causes in Parotids: (enlarged parotid +/- adenopathy)
- Infection, granulomatous,
- autoimmune disease e.g. Sjogren's syndrome) (Figure a)
- Benign lymphoepithelial lesions of HIV (Figure b)
- Other benign (e.g. Warthin's tumour),
- malignant (e.g. cystic intraparotid lymphadenopathy)
- obstructive disorders (e.g. sialocoeles) (Figure 18).

(a) **Axial CT scan** : bilateral multiple cystic lesions in both the deep and superficial lobes of the parotid (Sjogren's syndrome)

D/D :benign lymphoepithelial lesions of HIV

