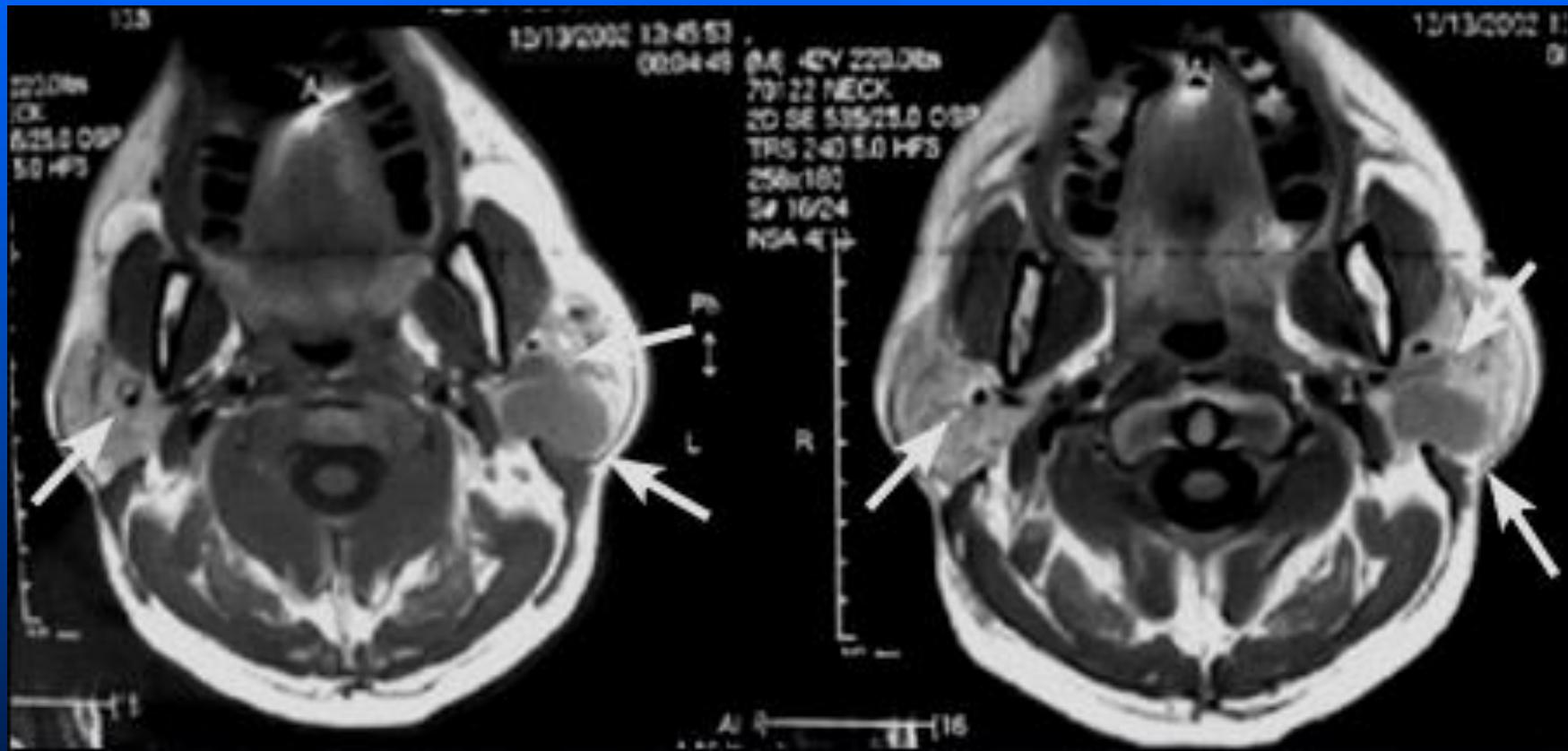
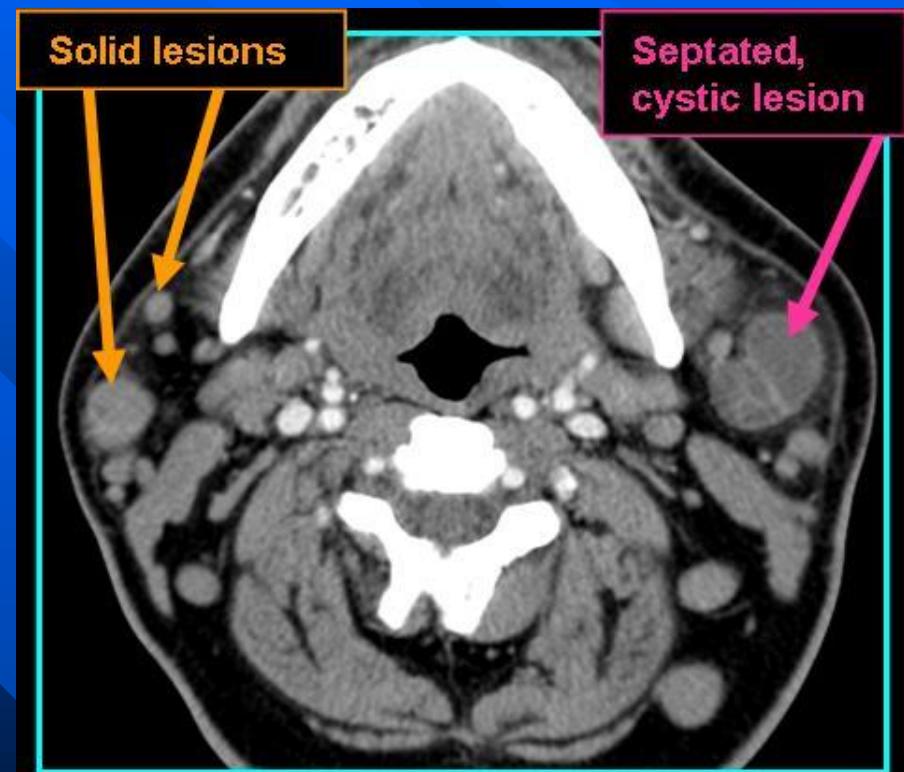
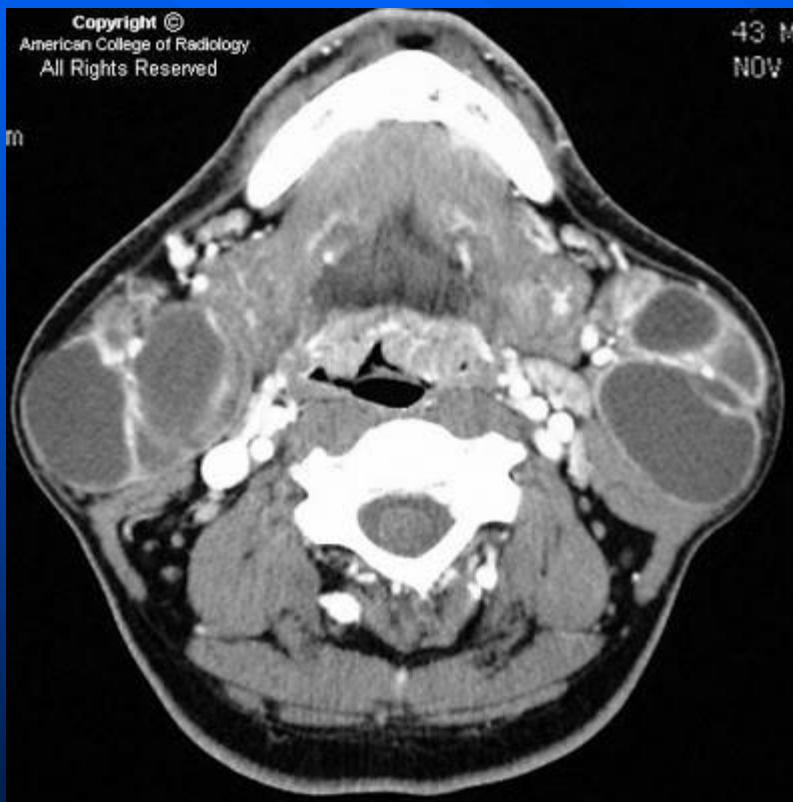


Benign lymphoepithelial lesions

- 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. sialoceles) (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

