

EOSINOPHILIC HOST RESPONSE AS A PROGNOSTIC VARIABLE IN ORAL SQUAMOUS CELL CARCINOMA

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Tissue eosinophilia in squamous cell carcinoma has long been recognized. Several studies have been carried out in the past in order to find the relationship between the amount of tumour associated eosinophils and prognosis of oral cancer. But the results of previous studies are not consistent and revealed contradicting conclusions.

Therefore the objective of the present study was to compare the relationship between eosinophilic host response with histological parameters such as metastasis, pattern of invasion and level of differentiation. In addition site, age and sex were also compared with tumour associated tissue eosinophilia.

The study sample consisted of 100 cases of oral squamous cell carcinoma selected from the archives of the Department of Oral Pathology of Faculty of Dental Sciences. The cases are from various sites in oral cavity. The sections, which were taken through the lesion, were histopathologically evaluated. In each case 10 high power fields under oil immersion were examined and the number of eosinophils were counted. Mean number of eosinophils at the advancing front of the lesion were analyzed with regard to other tumour characteristics such as level of differentiation, pattern of invasion and presence or absence of tumour metastasis. In addition age and sex were also compared with the amount of tissue eosinophils.

Mean number of eosinophils was high in lesions without metastasis but the difference did not reach statistical significance ($p>0.05$). Pattern of invasion and level of differentiation seem to have no significant correlation with the eosinophilic count. Tumour associated tissue eosinophilia (TATE) was not related to tumour site, patient age or sex.

In conclusion, our results suggest that tumour associated tissue eosinophilia is not a clinicopathologically useful prognostic marker in oral squamous cell carcinoma.