

DEFINITION

1. **True neuromas** are rare benign tumours and occur in connection with the sympathetic nervous system. They comprise the following types:
 - 1.1. **Ganglioneuroma**, which consists of ganglion cells and nerve fibres. It arises in connection with the sympathetic cord and therefore is found in the retroperitoneal tissue, or in the neck or thorax.
 - 1.2. **Neuroblastoma**, which is less differentiated than the ganglioneuroma, the cells being of an embryonic type. The tumour somewhat resembles a round-celled sarcoma. It occurs in infants and young children.
 - 1.3. **Myelinic neuroma** is very rare, being composed only of nerve fibres, as the ganglion cells are absent. It arises in connection with the spinal cord or pia mater.
2. Separate from the true neuroma is the so called "**false neuroma**" which arises from the connective tissue of the nerve sheath after injury to a nerve (lacerations or amputation). These swellings consist of fibrous tissue and coiled nerve fibres.

CLINICAL MANIFESTATIONS

3. Neuromas usually present as painful subcutaneous nodules. They form a smooth firm swelling which may be moved in a lateral direction but is otherwise fixed by the nerve from which it arises. Paraesthesia or pain is likely to occur from the pressure of the tumour on the nerve fibres which are spread over its surface.

AETIOLOGY

4. **True neuromas** are of unknown aetiology.
5. **False neuromas** arise as the result of trauma.

CONCLUSION

6. Neuromas are benign tumours which occur in connection with the sympathetic nervous system. The aetiology of true neuromas is unknown. False neuromas develop as a consequence of trauma.

REFERENCE

Mann C V and Russell R C G (Eds). Bailey and Love's Short Practice of Surgery. 21st Ed. 1992. London. Chapman & Hall Medical. p142.

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