

EXAMINATION OF LUMPS AND BUMPS

Patients may present with a lump as a primary complaint or one may be discovered during the examination. Whatever their anatomical location lumps are of one of three origins:

1. From the reticuloendothelial system (they are lymph nodes)
2. From the general tissues of the body (fat, muscle, nerve etc)
3. From structures peculiar to that location (thyroid, parotid gland, spleen etc)

The purpose of the examination is to discover the tissue of origin of the lump and the pathological process responsible. These are usually:

1. None, the lump is part of the normal anatomy.
2. Inflammatory
3. Neoplastic
4. Hyperplastic
5. Metabolic
6. Congenital
7. Traumatic

Use the examination to test hypotheses generated during the history.

PREPARATION

1. Ask the patient to indicate the position of the lump(s) and of any previous lumps
2. Make sure you have full exposure of the location of the lumps and the lymph nodes draining that area.

3. Ask whether the lump is tender to avoid hurting the patient during the examination.

TEST PROCEDURE

1. Observation:

- Location with reference to the body surface landmarks
- Contour
- Pulsation
- Colour of overlying skin
- Abnormalities in nearby skin
- Abnormal vessels in the area

2. Palpation

- Temperature
- Pulsation
- Tenderness
- Mobility. Does the lump appear to be fixed or is it easy to move around?
- Plane of anatomical attachment. Test this by checking mobility when the patient tenses underlying or overlying muscles.
- Relation to known deep structures (liver, thyroid etc)
- Consistency
- Fluctuation. Does the lump behave as if it contained fluid? To test this put two fingers of one hand either side of the lump and press the middle with the other hand.
- Emptying. Does sustained pressure make the lump smaller?

3. Transillumination. Is light from a pen torch transmitted directly through the lump?

TEST INTERPRETATION

The following guide help interpret the pathology of lumps.

1. The lump is part of the normal anatomy. Common in introspective patients. Requires you know the normal anatomy!
2. *Inflammatory*. Shows many or all of the cardinal features of inflammation
 - Heat
 - Redness
 - Swelling
 - Pain
 - Loss of function
3. *Neoplastic*. Shows some or all of the following:
 - Painless,
 - irregular,
 - attached to overlying skin,
 - attached to underlying or overlying muscle
 - Hard as stone
 - Does not empty, fluctuate or transilluminate
4. *Hyperplastic*
 - Smooth, regular
 - Non-tender
 - Mobile
 - Soft or firm
 - May fluctuate, empty and/ or transilluminate

5. *Metabolic*

- Painless,
- irregular,
- attached to or part of overlying skin,
- attached to or part of deep tissues (eg tendons)
- soft
- Does not empty, fluctuate or transilluminate
- Characteristic site (eg gouty tophi in ears)

6. *Congenital*

- Characteristic site (eg thyroglossal cyst in neck midline)
- Painless

7. *Traumatic*

- Characteristically related to site of previous trauma
- Usually regular