

Adnexal benign tumor with deroupting dermoscopy

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Sir,

A 38 years old man presented a brown nodule on the face, which appears since childhood and was growing up 02 months before the consultation. It was painless and without pruritus. The dermatological examination showed a pigmented nodule, localized under the lower left eyelid. Dermoscopy showed typical ovoid nests and thick arborizing vessels (Fig. 1). In front of this clinic-dermoscopic appearance, pigmented basal cell carcinoma was evoked. After the nodule resection, histologic examination showed a proliferation of tumors connected to the epidermis, arranged in masses and made of regular cuboid cells presenting monomorphic nuclei with finely nucleated chromatin and an abundant basophilic cytoplasm. The tumor cells are pigmented and the mitoses were rare (Fig. 2).

Eccrine poroma is uncommon benign neoplasm first described by Pinkus in 1956 [1]. It originates from the terminal ductal portion of the sweat glands annexed to the skin, they commonly appear as a skin colored papules or nodules on the extremities [2]. Its pathogenesis may be secondary to trauma scars [3]. In our patient the facial location suggests the implication of UV radiations.

Although Blue-gray ovoid nests and arborizing vessels are known as a specific dermoscopic signs of Basal Cell Carcinoma, they have been found recently in dermoscopic features of pigmented eccrine poroma [4].

The eccrine poroma is recognizably distinct from the other eccrine duct tumors [5]. They are designated as benign lesions due to their lack of cytologic atypia and mitotic activity, as was found in our patient. The most described aspects of pigmented eccrine poroma

is the proliferation of uniform cuboid cells with light-colored cytoplasm and evident intercellular bridges [2]. We can find also hyperkeratosis, melanin granules and pigmented melanocytes like in our case.

Consent

The examination of the patient was conducted according to the Declaration of Helsinki principles.



Figure 1: Dermoscopic image showing ovoid nests and arborizing vessels.

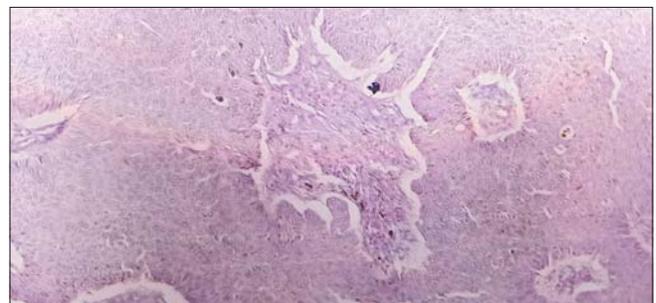


Figure 2: Cuboid cells proliferation with melanine granules and pigmented melanocytes, (HES Stain G x 100).

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The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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