

Anterior cervical hypertrichosis: A rare location

Hanane Chahoub¹, Ibtissam Al Faker², Farah Marraha², Najlaa Rahmani²,
Younes Benyamna², Salim Gallouj²

¹Department of Dermatology University hospital center of Tangier, Tetouan, Al Hoceima, Morocco, ²Faculty of Medicine and Pharmacy Tangier, Abdelmalek Essaadi University, Tangier, Morocco

Corresponding author: Hanane Chahoubb, MD, E-mail: drchahoubhanane@gmail.com

We report the case of a twelve-year-old male who presented with isolated anterior cervical hypertrichosis persistent since birth. No notion of trauma or local inflammation or the use of a topical treatment was noted. The patient had no other clinical symptoms and no similar family history.

A clinical examination found a tuft of hair, approx. 6 × 3 cm in size, at the level of the mid-neck region, consisting of fine, brown hairs, 3 cm in length (Fig. 1a), with a dermoscopic appearance showing terminal hair and fluffy hair without other associated signs. (Fig. 1b). The rest of the somatic examination was unremarkable. A laser hair removal treatment was offered to the patient with a good response.

Anterior cervical hypertrichosis is a rare form of congenital localized hypertrichosis. To date, around forty cases have been reported worldwide [1]. Clinically, it is characterized by a tuft of terminal hairs located in the anterior cervical region.

It may sometimes be associated with neurological, orthopedic, or ocular abnormalities. The most common association is with motor and sensory neuropathy, followed by hallux valgus, optic atrophy, chorioretinopathy, mental retardation, and localized dorsal hypertrichosis. Familial and sporadic cases have been reported [2].

The management of isolated anterior cervical hypertrichosis is cosmetic. Laser hair removal is the best recommended treatment, with an estimated response of 70% [3].

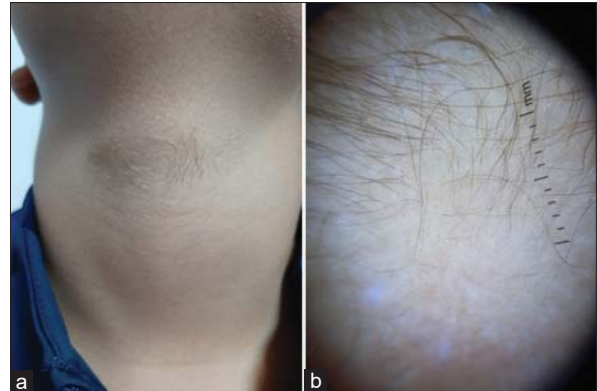


Figure 1: (a) Tuft of hair, 6 × 3 cm in size, at the level of the mid-neck region. (b) Dermoscopy showing terminal hairs measuring 3 cm in length.

Consent

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

The authors certify that they have obtained all appropriate patient consent forms, in which the patients gave their consent for images and other clinical information to be included in the journal. The patients understand that their names and initials will not be published and due effort will be made to conceal their identity, but that anonymity cannot be guaranteed.

REFERENCES

1. Blasco-Morente G, Sánchez-Carpintero I. Isolated Anterior cervical hypertrichosis. *Actas Dermosifiliogr.* 2017;108:672.
2. Nalluri R, Gilmour E, Brooke R. Anterior cervical hypertrichosis. *Eur J Dermatol.* 2010;20:393-4.
3. Bostan S, Yaşar Ş, Serdar ZA, Gizlenti S. Anterior cervical hypertrichosis: A sporadic case. *Turk Pediatri Ars.* 2016;51:49-51.

Copyright by Hanane Chahoubb, et al. This is an open-access article distributed under the terms of the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original author and source are credited.

Source of Support: Nil, **Conflict of Interest:** None declared.

How to cite this article: Chahoub H, Al Faker I, Marraha F, Rahmani N, Benyamna Y, Gallouj S. Anterior cervical hypertrichosis: A rare location. *Our Dermatol Online.* 2023;14(1):100.

Submission: 13.07.2022; **Acceptance:** 02.10.2022

DOI: 10.7241/ourd.20231.24