

An awkward looking pilomatrixoma

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Abstract

Pilomatrixoma is a rare and benign skin tumor of the hair follicle that tends to develop in the head and neck area. We report a case and briefly review the literature.

Case Report

This 30 year old gentleman who was treated for suspected pulmonary tuberculosis four years previously, presented to the plastic surgery clinic with a 3cm x 2cm, erythematous, fluid filled lesion on the left neck which had been growing for five months. On examination, the skin lesion had an underlying palpable 3cm mass. An ultrasound scan showed this to be a cystic lesion. Infectious diseases were consulted in view of the fact that this might have been cutaneous tuberculosis. However, fluid aspirates showed no signs of tuberculosis and an incision biopsy was indicative of a pilomatrixoma. The histology report from the complete excision came back as: "The specimen contains a benign pilomatrixoma".

A pilomatrixoma is also known as a pilomatricoma or a benign calcifying epithelioma of Malherbe. It is an uncommon slow growing benign adnexal skin tumour with a differentiation towards hair cells.

Reports on the bullous variant of pilomatrixoma are rare. It occurs mostly on the shoulder and upper arms of females. It can also be found on the neck, trunk, eyelid, and scalp. The commonest age of presentation is between 10-20 years, and they vary between 1 and 3 cm in size. It usually presents as a flaccid red bulla with an underlying palpable hard mass.

Different theories have been proposed for the mechanism of bulla formation in pilomatrixoma. It could be due to mechanical irritation, a pseudo blister or production of elastolytic enzymes which disrupt the collagen fibres and destruct and dilate the lymphatic vessels, which lead to accumulation of lymph fluid in the dermis causing a bulla.¹ Thus, bullous pilomatrixoma is also named as lymphangiectatic pilomatrixoma.²

Figure 1: Bullous pilomatrixoma on the left shoulder



References

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