A verrucuous tumor of the leg

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A 56-year-old woman, with no medical history, presented with a chronic nodular lesion of the left leg, of two year's duration. There were no associated systemic symptoms. Physical examination revealed a warty mass with a keratotic surface of measured 2 cm. (Figure 1)

A surgical excision was performed. Histological examination showed hyperkeratosis, parakeratosis, papillomatosis and cystic invaginations extending downwards from the epidermis. Two different epithelial cell layers consisting of outer small cuboidal cells and inner columnar cells were present. The papillary projections and dermis had also dense infiltration of plasma cells. (Figure 2) Based on these findings, a diagnosis of Syringocystadenoma Papilliferum (SCAP) of the leg was established.

SCAP is a benign adnexal tumor. Most of the cases present with solitary lesion in the head and neck region at birth or in early childhood.¹ In fact, only two cases of SCAP on lower leg have been reported in literature.^{1,2} It is mainly, associated with oragnoid nevus. Histogenesis of this tumor remains controversial.² Histopathologically, there is no difference between SCAP on different locations.¹Despite its rarity, we must consider it in the differential diagnosis of any longstanding nodular lesion with crusted surface. Surgical excision is curative.

References:

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Khurana VK, Mehta RK, Chaudhary D, Pant L. A case of syringocystadenoma papilliferum on lower leg: a rare location. Indian J Dermatol. 2013;58(5):405. doi:10.4103/0019-5154.117306

Figures legend:

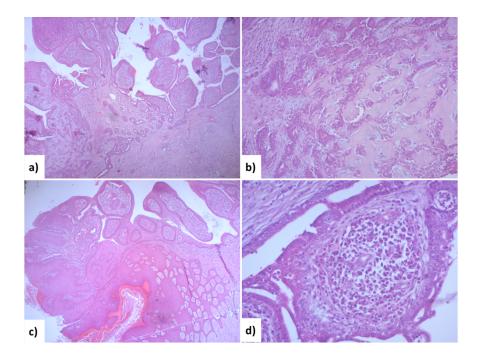
Figure 1: a warty mass with a keratotic surface of measured 2 cm on the left leg.

Figure 2: Proliferation of papillary and tubular structures bordered by significant epidermal hyperplasia forming lateral beaks (a, HEx25) (b, HEx100).

The papillae are lined with a bistratified epithelium without atypia and their axes are very rich in plasmocytes (c, HEx25) (d, HEx200)



Figure 1 : Figure 2



A medical key message:

Syringocystadenoma Papilliferum (SCAP) is a benign adnexal tumor. Most of the cases present with solitary lesion in the head and neck region at birth or in early childhood. In fact, only two cases of SCAP on lower

leg have been reported in literature. We report an atypical case by its location and its clinical aspect.