

DERMATO-VENERELOGICAL QUIZ

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Question 1

An 82-year-old Chinese gentleman presented with a painless solitary nodule on his scalp. He noticed the nodule for a month, consulted a practitioner and was told that he had a sebaceous cyst. Recently the nodule became eroded. Physical examination showed an eroded scalp nodule, two centimeter in diameter, with a central crater. Friable material was found in the centre.

1. What are the differential diagnoses of the scalp nodules?
2. Skin biopsy showed a dermal infiltrate of poorly differentiated cells. What is the most likely diagnosis?



Figure 1

Question 2

A 19-year-old lady presented with multiple growths on the back of her thigh. They were there for a year and were asymptomatic. Physical examination found multiple small cystic papules, each about two to three centimeter in diameter, with a grayish-blue tinge at the back of her thigh.

1. What are the possible causes of multiple cystic growths in this patient?
2. Biopsy of a lesion was done and histology showed a cyst, lined by stratified squamous epithelium, containing keratinous material and hair shafts. What is the diagnosis?

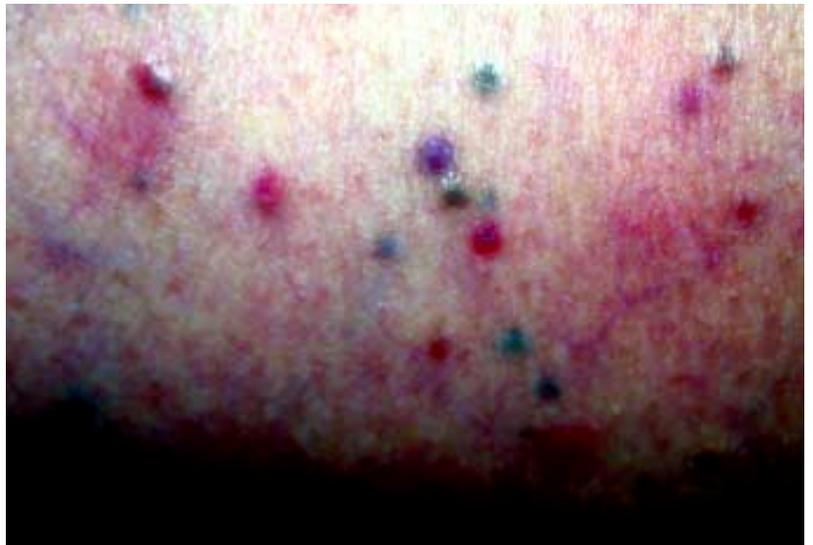


Figure 2

(answers on page 197)

Answers to Dermato-venereological Quiz on page 189

Answer (Question 1)

1. Scalp nodules can be benign lesions like pilar cysts, cylindroma, epidermal cyst, angiolymphoid hyperplasia with eosinophilia; or malignant lesions like angiosarcoma, basal cell carcinoma, malignant melanoma and metastatic carcinoma.
2. Cutaneous metastasis on scalp. Histological examination showed metastatic poorly differentiated non-small cell carcinoma with squamous differentiation. Further investigations found primary carcinoma of the lung.

Involvement of the skin by metastases from a distant primary site can be a first sign of tumour in 0.8% of patients with systemic cancer. They can come from many different tumour types and sites. They usually present as a fast growing erythematous mass. Common tumours that metastasize to the skin are breast carcinoma and melanoma. Others are from lung, stomach, kidney and ovary. Scalp quite commonly receives metastases from lung, kidney and breast. Nodules and alopecia neoplastica may result. Cutaneous metastases in a patient with internal malignancy usually signify widespread systemic disease, hence a poor prognosis.

Answer (Question 2)

1. Examples of non-calcified multiple small cysts are steatocystoma multiplex, milia cysts, epidermal cysts, parasitic cysts and eruptive vellus hair cysts. Examples of calcified cysts include pilomatricoma, metastatic calcification, calcified epidermal cyst, and calcinosis cutis in collagen vascular diseases.
2. Eruptive vellus hair cysts. Vellus hair cysts present as multiple asymptomatic small cysts, 1-5 mm in diameter, commonly on presternal area. Inherited variant and facial variant were also reported. Histologically it is a mid-dermal cyst, with follicular lining, containing laminated keratin and vellus hairs. Lesions usually persist although spontaneous resolution has been reported.