

Dermato-venereological Quiz

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A 34-year-old lady presented with a growth over her right third toe for three years. There was mild discomfort during walking. It had been treated by shave excision one year previously by her family physician after which the growth recurred and gradually returned to its original size. Physical examination showed a pinkish, firm, non-tender polypoid growth with a smooth surface located over the medial aspect of the right third toe. The accompanying nail plate had a longitudinal depression (Figure 1). There were no other cutaneous abnormalities and the family history was negative. Surgical excision with exploration of the proximal nail fold and nail matrix was performed and the specimen was sent for histopathology (Figures 2 & 3).



Figure 1. Polypoid growth over right toe.

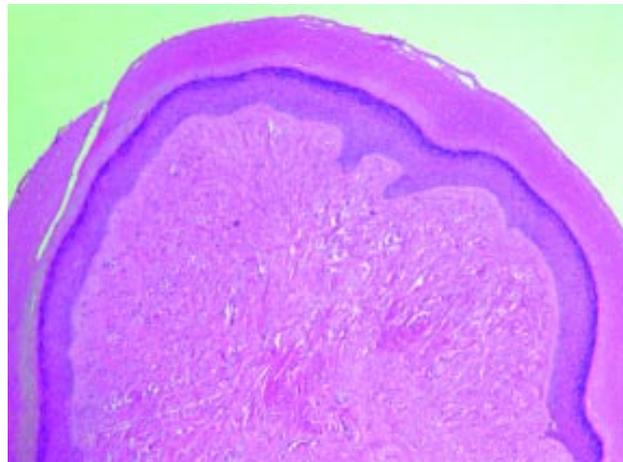


Figure 2. Polypoid mass formed by dermal type fibrous tissue in low power view.

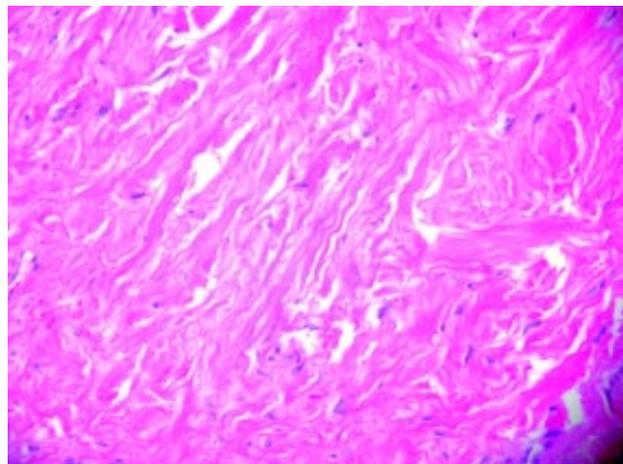


Figure 3. Hyalinized collagen fibres in high power view.

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Questions

- 1) What are the differential diagnoses?
- 2) What are the histological features?
- 3) What is the diagnosis and what other physical signs you should look for?
- 4) What are the treatment options?

(Answers on page 46)

Answers to Dermato-venereological Quiz on page 35

- 1) The differential diagnoses include periungual fibroma, post traumatic keloid, partially treated wart and pyogenic granuloma.
- 2) The histology showed a polypoid mass formed by a dermal type fibrous tissue. Some hyalinized collagen fibres were noted. The squamous cells had preserved maturation and polarity.
- 3) The diagnosis is solitary periungual fibroma. Multiple lesions occur in over 50% of patients with tuberous sclerosis. Other cutaneous clues for tuberous sclerosis include ash leaf macules, facial angiofibromas, fibrous facial plaque and shagreen patch. The fibroma may compress the nail matrix and therefore produce a longitudinal groove in the nail plate.
- 4) Periungual fibromas are most often treated by surgical resection with nail fold and nail matrix exploration, bearing in mind the risk of recurrence and risk of damage to the proximal fold and nail matrix during resection. Other destructive methods reported to be useful include cryotherapy, electrocauterization, CO₂ laser surgery and phenolization after shave excision.^{1,2}

References

1. Berlin AL, Billick RC. Use of CO₂ laser in the treatment of periungual fibromas associated with tuberous sclerosis. *Dermatol Surg* 2002;28:434-6.
2. Mazaira M, del Pozo Losada J, Fernández-Jorge B, Fernández-Torres R, Martínez W, Fonseca E. Shave and phenolization of periungual fibromas, Koenen's tumors, in a patient with tuberous sclerosis. *Dermatol Surg* 2008;34:111-3.