Mucoscopy of Fordyce's Spots on Lips

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Case 1

A 30-year-old male patient presented with multiple asymptomatic yellow spots on upper lip [Figure 1a]. On examination, multiple, yellow-colored papules discrete and coalescing were present on the upper lip. Lower lip and buccal mucosa were normal. From typical location and clinical examination, a diagnosis of Fordyce's spot (FS) was made.

Case 2

A 25-year-old male patient presented with asymptomatic yellowish spot on the lower lip for last 6 months [Figure 1b]. On examination, a single yellow colored plaque (0.3 × 0.2 cm) with few adjacent scattered yellowish papules were present over the lower lip. From clinical examination a diagnosis of FS was made.

Mucoscopy was performed on both the patients with a USB dermatoscope.[1] Mucoscopy with non-polarizing light revealed slightly raised yellowish papules [Figure 2a]. Polarized light mucoscopy showed whitish to yellowish discrete ovoid structures surrounded by linear and branching vessels [Figure 2b]. Each FS had an opacity in the center indicating the opening of the sebaceous gland onto the epithelial surface [Figure 2b]. Some of the FS at the vermilion border showed hair follicle at the center [Figure 2c].

The application of a dermatoscope is now not limited to the cutaneous pathologies.[1,2] The Dermoscopy of the mucosa and its pathologies is termed as mucoscopy.[1] With the ever evolving field of dermoscopy, it is pertinent to study the dermoscopic features of various lesions involving the mucosa. FSs are ectopic sebaceous glands seen commonly on the lips (upper lip > lower lip), buccal, and genital mucosa.[3] Infrequently, they can also be seen on oesophagus, uterine cervix, sole of the foot, and tongue. Histopathologically, a FS consists of a sebaceous lobule or gland located in the dermis.[3] The Dermoscopy of FS on the penile shaft has been described and it shows vascular "garlands-like" aspect whose "bows" seem to wind around yellowish bunch-like lobules without crossing them.[4] In addition to already described features, mucoscopy of FS on lips in these two cases showed a central opacity possibly indicating the opening of sebaceous glands onto the surface. Common differentials include mucosal

Figure 1: Fordyce's spots on upper lip. (a) and lower lip. (b) of two patients

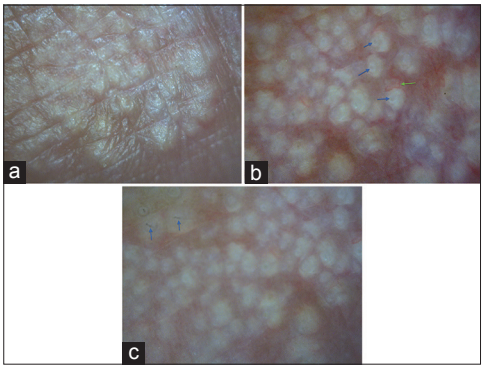

Figure 2: (a) Non-polarizing mucoscopy showing slightly raised yellowish papules. (b) Polarized light mucoscopy showed whitish to yellowish discrete ovoid structures with central opacity (blue arrow) and surrounded by linear and branching vessels (green arrow). (c) Hair follicle at the center of Fordyce's spot. [Dinolite AM413ZT; ×50]

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warts (MW), molluscum contagiosum (MC), and focal vitiligo of lips. The Dermoscopy of MC shows yellowish white amorphous structure in the center of the lesion with a surrounding crown of linear, fine, and sometimes blurred vessels.[4] The Dermoscopy of MW shows dilated vessels in the papillomatous lesions with irregular white projections.[4] The Dermoscopy of mucosal vitiligo shows an area of depigmentation and underlying dotted vessels; with or without perifollicular pigmentation at the skin-mucosa junction.

Although FSs can be easily identified on naked eye examination or a hand lens, we attempt to describe its mucoscopic features to differentiate it from common differentials such as MW, MC, and focal vitiligo of lips. Histopathology remains the gold standard (limitation in our cases) in doubtful cases.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form the patient(s) has/have given his/her/their consent for his/her/their images and other clinical information to be reported in the journal. The patients understand that their names and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

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Conflicts of interest

There are no conflicts of interest.

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