

CLINICAL IMAGE

Solitary pigmented nodule on the trunk: What is your diagnosis?

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Abstract

The aim of my clinical image is to recall this rare and benign tumor and to emphasize the role of dermoscopy in the diagnosis.

KEYWORDS

Abrikossoff's tumor, dermoscopy, granular cell tumor

1 | SOLITARY PIGMENTED NODULE ON THE TRUNK: WHAT IS YOUR DIAGNOSIS?

A 55-year-old man presented with a 1-year history of a painful slow-growing tumor on the left iliac region. Physical examination showed an oval brownish well-defined hard, fixed tumor, simulating ectopic breast, measuring about 2 × 3 cm (Figure 1A). No regional lymphadenopathy was noted. Complete blood cell count and blood chemistry analyses were normal. The dermoscopy showed yellowish center with lighter, hypopigmented lines, surrounded by light-brown pigmented network (Figure 1B). Microscopic findings revealed irregular arrangement of large polygonal cells with granular eosinophilic cytoplasm infiltrating the dermis (Figure 1C). At higher magnification, several large eosinophilic cytoplasmic granules, surrounded by a clear halo, were identified (Figure 1D). For further confirmation, immunocytochemistry was performed for S100 which showed cytoplasmic positivity in the cells. The lesion was treated with surgical excision. There was no recurrence after a 1-year follow-up.

2 | WHAT IS YOUR DIAGNOSIS?

Granular cell tumor (GCT).

3 | COMMENT

Granular cell tumors, also known as Abrikossoff's tumor is a rare benign neoplasm, accounting for only 0.5% of all soft tissue neoplasms, that is, usually seen in the fourth to sixth decades of life.¹ It is considered a neural tumor derived from Schwann cells, since it stains positively for S100 and other neural markers. It is more frequently located on the tongue, but it can occur at any site.¹ Malignant cases are exceedingly rare (1%–3%).¹ Clinical diagnosis of GCT is difficult and not usually considered. It appears as a slowly growing asymptomatic, solitary, skin-colored or rarely pigmented nodule with a smooth or slightly rough surface.¹ Occasionally, tenderness is described, like in our case. Differential diagnoses of skin adnexal tumor, dermatofibromas, and neurofibromas may be considered. The dermoscopic criteria of GCTs have recently been updated.² The presence of a

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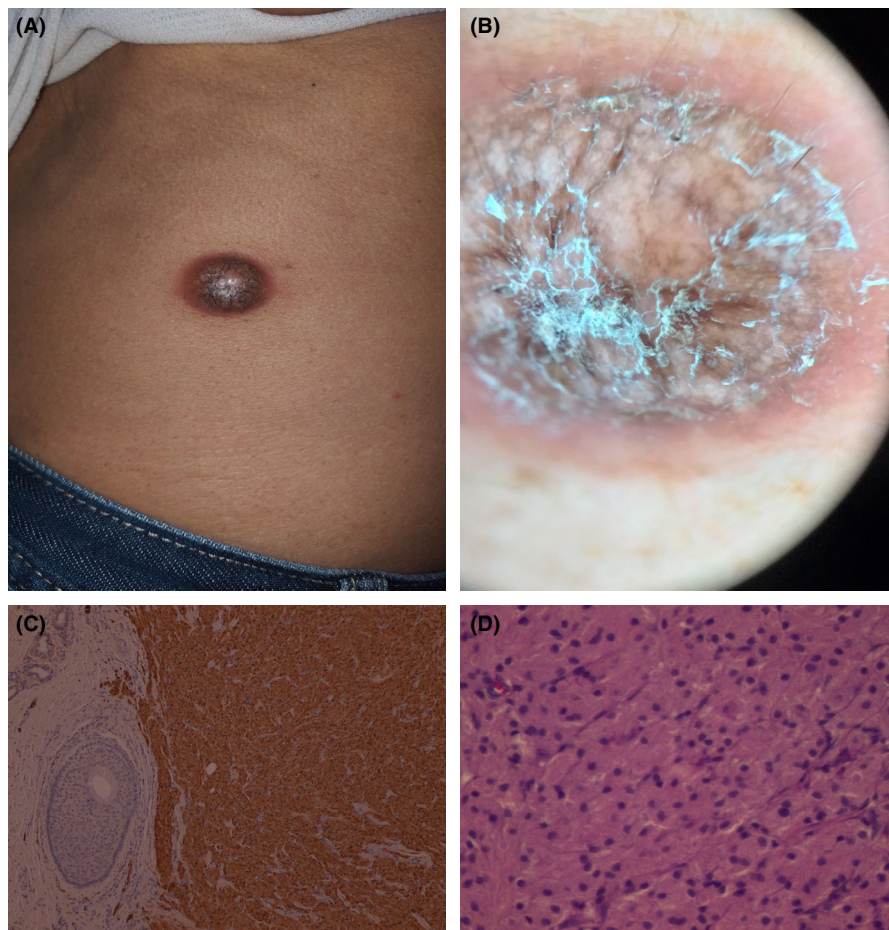


FIGURE 1 (A): An oval, brownish well-defined hard, fixed tumor measuring about 2 × 3 cm. (B): Dermoscopic image tumor showed yellowish center with lighter, hypopigmented lines, surrounded by light-brown subtle pigmented network. (C): Low power section shows the hyperpigmented hyperplastic epithelium with the tumor underneath. (D): High power image shows large polygonal cells with abundant eosinophilic granular cytoplasm with central round nuclei with vesicular chromatin

nodular lesion in combination with yellowish center, peripheral network, and pale circles should lead us to think about GCT and perform a biopsy for confirmation.² The treatment of choice is wide excision of the lesion with histologically clear margins.

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CONFLICTS OF INTEREST

The authors declare that there are no conflicts of interest in this work.

AUTHOR CONTRIBUTION

Miss. Refka Frioui is the guarantor of the content of the manuscript, included the data and analysis. Dr. Amal Chamli contributed to interpretation of data and revision of the manuscript. Dr. Anissa Zaouak, Dr. Samy Fenniche, and Dr. Houda Hammami contributed to analysis and interpretation of data, revised it critically for important intellectual content, and final approval of the version to be submitted.

ETHICAL APPROVAL

Informed consent was obtained from the patient.

CONSENT

The examination of the patient was conducted according to the principles of the Declaration of Helsinki. The authors certify that they have obtained all appropriate patient consent forms, in which the patient gave his consent for images and other clinical information to be included in the journal. The patient understands that his name and initial will not be published and due effort will be made to conceal his identity, but that anonymity cannot be guaranteed.

DATA AVAILABILITY STATEMENT

All data generated are included in this published article.

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