

## The musician's mark



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### INTRODUCTION

Many professions come with an increased risk of medical conditions caused by occupational exposures. Direct skin contact is needed for playing musical instruments; as a result, musicians are at greater risk for the development of certain dermatologic conditions specific to the instruments they play. A dermatologic condition that affects players of brass wind instruments or labrosones, literally translated as *lip-vibrated instrument*, is a hyperkeratotic lesion on the player's lips. Trumpeters can present with firm, hyperkeratotic, wartlike lesions on their upper lips,<sup>1,2</sup> in what is colloquially called a *trumpeter's wart*. This name is one of many medical misnomers,<sup>3</sup> as the lesion is not a wart but rather a callus caused by the repeated friction of the trumpet on the player's lips. A trumpeter's wart is diagnosed clinically, and a biopsy should not be performed; it is in fact contraindicated, as it can hinder the musician's ability to play.

### CASE REPORT

A 69-year-old Italian American male musician presented for routine skin cancer screening and was noted to have a lesion on his central upper lip. Physical examination found a 1-cm flesh-colored firm, fibrous nodule on his central upper lip (Fig 1). On further questioning the patient reported that he has been playing the trumpet since the age of 7. After he enlisted in the army, he played in the army band and continued playing professionally throughout his life, over 60 years at the time of his visit. The patient recalls that he has had this bump since he was a teenager. Additionally, he states that he knows of other trumpeters with a similar-appearing bump. The patient was not interested in treatment, nor was it recommended, as it would negatively affect his playing. Removing the contour from his upper lip



**Fig 1.** Hyperkeratotic lesion on upper lip of patient.

would impede his ability to create the necessary vibrations to create the proper trumpet sounds.

### DISCUSSION

Many skin conditions are uniquely related to musicians. We present a trumpeter with a firm fibrous lesion on his upper lip, which is colloquially known as a *trumpeter's wart*. We presume that the underlying mechanism is hyperkeratosis from an adaptive phenomenon secondary to repetitive friction. However, the lesion does not appear as classic hyperkeratosis. Perhaps the clinical appearance of the lesion is analogous to sucking calluses of neonates and is caused by a combination of intracellular edema and hyperkeratosis.<sup>4</sup> Although the underlying process of the lesion is not completely elucidated, practitioners need to know of this benign lesion, which is diagnosed based on history and physical examination findings alone. The lesion should not be biopsied or removed, as this would cause functional impairment in a musician's ability to play and would

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negatively impact quality of life. Trumpeter's wart is one example of many medical misnomers, and to our knowledge this is the first case report on this topic.

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