

Mucoscopy of Mucocele

A 15-year-old boy presented with a swelling on the lower lip for the past 1 month. It was progressively increasing in size and was asymptomatic. The patient gave history of repeated lip biting. On examination, a single slightly bluish, soft, fluctuant nodule (4×5 mm) was present on the lower lip [Figure 1]. Rest of the muco-cutaneous examination was noncontributory. Dermoscopy [Dino-Lite AM413ZT, Polarizing, New Taipei, Taiwan] was done using the method suggested by Jakhar *et al.*^[1] Dermoscopy revealed a shiny surface with extensive vascular network (both linear and branched vessels) and intervening white structureless areas [Figure 2a and b]. On the basis of history, typical location, and clinical examination, a diagnosis of mucocele was made. The lesion was surgically excised [Figure 3a] and sent for histopathology. Histopathology revealed a mucous extravasation cyst in the dermis with mucinophages and mucin in the lumen [Figure 3b]. The mucocele was



Figure 1: An asymptomatic single soft, fluctuant slightly bluish swelling on the lower lip

This is an open access journal, and articles are distributed under the terms of the Creative Commons Attribution-NonCommercial-ShareAlike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as appropriate credit is given and the new creations are licensed under the identical terms.

For reprints contact: reprints@medknow.com

lined by the granulation tissue (devoid of epithelial lining), infiltrated by histiocytes and inflammatory cells.

Mucocele is a mucous-filled cyst caused by accumulation of mucous secondary to alterations in minor salivary glands.^[2,3] Lower lip is the most common site in oral cavity, and the most probable etiology includes lip biting or trauma. The diagnosis is usually clinical.^[2,3] Dermoscopy of the mucosa and its pathology has been termed as mucoscopy.^[1] The existing dermatoscopes are not designed to perform mucoscopy as swiftly as dermoscopy. Jakhar *et al.* have suggested an innovative technique of performing mucoscopy and the same technique was used in our patient.^[1] The shiny surface of the mucocele and extensive vascular network on mucoscopy appears

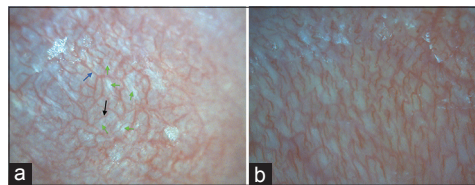


Figure 2: (a) Mucoscopy showing extensive vascular network with linear (blue arrow) and branched vessels (black arrow) with intervening white structureless areas (green arrow); (b) Mucoscopy of the surrounding mucosa showing linear and serpentine vessels (black arrow) and absence of white structureless areas [Dino-Lite AM413ZT; $\times 50$; Polarizing]

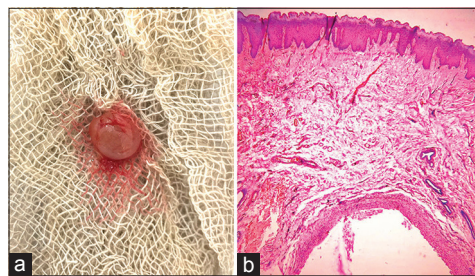


Figure 3: (a) Intact mucocele after surgical excision; (b) histology showing a mucous extravasation cyst in the dermis with mucinophages and mucin in the lumen with the cyst wall lined by the granulation tissue (devoid of epithelial lining), infiltrated by histiocytes and inflammatory cells [hematoxylin and eosin; $\times 100$]

How to cite this article: Kaur I, Jakhar D, Anand P. Mucoscopy of mucocele. Indian Dermatol Online J 2019;10:358-9.

Received: May, 2018. **Accepted:** October, 2018.

Ishmeet Kaur,
Deepak Jakhar¹,
Priyanka Anand²

Department of Dermatology
and STD, ESI-PGIMS,
Basaidarapur, Departments of
¹Dermatology and ²Pathology,
NDMC Medical College and
Hindu Rao Hospital, New Delhi,
India

Address for correspondence:
Dr. Deepak Jakhar,
H.NO-82, V.P.O Goyla Khurd,
New Delhi - 110 071, India.
E-mail: dr.deepakjakhar@
yahoo.in

Access this article online

Website: www.idoj.in

DOI: 10.4103/idoj.IDOJ_96_18

Quick Response Code:



because of stretching of the overlying tissue and vascular congestion. The white structureless areas correspond to the hyperplastic epithelium. The differentials of mucocele include fibroma, lipoma, oral lymphangioma, and benign or malignant salivary gland tumors.^[2,3] Here, an attempt has been made to describe the dermoscopic features of mucocele and further studies may be needed to substantiate the findings.

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.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

References

1. Jakhar D, Grover C. Innovative modification of the USB dermatoscope for mucoscopy. *J Am Acad Dermatol* 2018;78:e3-4.
2. Chaitanya P, Praveen D, Reddy M. Mucocele on lower lip: A case series. *Indian Dermatol Online J* 2017;8:205-7.
3. More CB, Bhavsar K, Varma S, Tailor M. Oral mucocele: A clinical and histopathological study. *J Oral Maxillofac Pathol* 2014;18(Suppl 1):S72-7.