



CASE REPORT

Eccrine Nevus on the Neck: A Case Report and Review of the Literature

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Eccrine nevus is an extremely rare benign cutaneous hamartoma that usually occurs in childhood and adolescence. It has a wide range of clinical manifestations, and histological findings reveal a proliferation of structurally normal eccrine ducts. Herein, we present a case of eccrine nevus on the neck of an 8-year-old girl. Our literature review reveals that the head and neck region is a rare anatomical location for eccrine nevus as it has a predilection for extremities. Our review also suggests that overlying skin changes are common in eccrine nevus regardless of accompanying localized hyperhidrosis. (**Ann Dermatol 33(5) 456~458, 2021**)

-Keywords-

Eccrine nevus, Histology, Hyperhidrosis

INTRODUCTION

Eccrine nevus is a rare benign hamartoma characterized by a proliferation of structurally normal eccrine glands¹. It has a wide range of clinical manifestations from a localized papule to a large hypopigmented patch. While the skin lesion is usually associated with localized hyperhid-

rosis, asymptomatic cases have also been reported². Herein, we report a case of eccrine nevus on the neck, a rare hamartoma at a rare location. We received the patient's consent form about publishing all photographic materials.

CASE REPORT

An 8-year-old girl presented with a skin-colored subcutaneous nodule on the nape of the neck (Fig. 1). The lesion measured 1 cm in diameter and was first found a year prior. An excisional biopsy was performed under the impression of pilomatricoma. Histopathological findings, however, revealed a proliferation of normal eccrine ducts without vascular abnormalities, suggesting pure eccrine nevus (Fig. 2). These findings prompted further history-taking, and the patient's mother reported that she had noticed profuse sweating from the region for some time.

DISCUSSION

Eccrine nevus is an extremely rare disease entity with only a small number of reports in the literature. It is diagnosed histologically, characterized by hyperplasia and/or hypertrophy of eccrine glands³.

In order to evaluate the clinical manifestations of eccrine nevus, we collected all the biopsy-proven cases of pure eccrine nevus in the literature, and 20 eligible cases including the present case were identified (Table 1)¹⁻¹⁹. Eccrine nevus has varying clinical manifestations ranging from a single nodular lesion to a wide patch that covers most of the trunk^{17,19}. Meanwhile, those with localized hyperhidrosis have been known to generally have normal overlying skin². However, our literature review revealed that the overlying skin lesions, such as skin-colored nodules and pigmented plaques, are common as 8 of 14 cases

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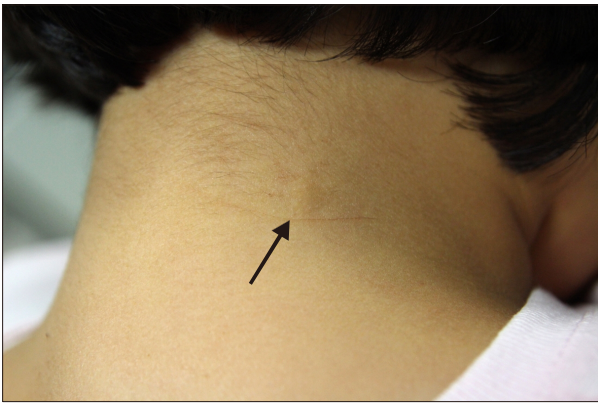


Fig. 1. Skin-colored nodule on the nape of the neck (arrow).

with localized hyperhidrosis had accompanying skin manifestations; a single nodule or grouped papules were commonly found^{4,12,14,19}, while a rare form of a wide hypopigmented patch or a perianal skin tag was also reported^{15,17}. Furthermore, most of the eccrine nevi were located in the extremities, with a predilection for forearms, whereas there has been only one prior case found in the head and neck area¹². Lastly, our review confirmed that most eccrine nevi are found during childhood and adolescence³; seventeen of the 20 cases occurred before 20 years of age.

The treatment strategy for eccrine nevus depends on the size of the lesion, as well as accompanying symptoms and patient's preference. When the lesion is small, surgical ex-

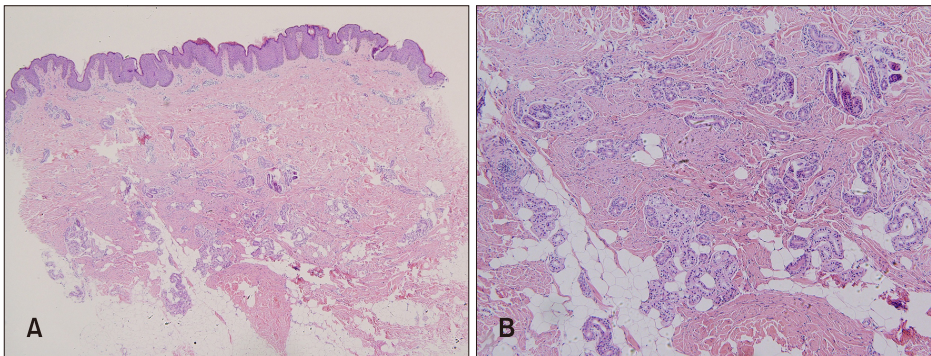


Fig. 2. Histopathology of the nodule showing (A) acanthotic epidermis and (B) proliferation of structurally normal eccrine glands (A: H&E, $\times 40$; B: H&E, $\times 100$).

Table 1. Reported cases of biopsy-proven eccrine nevus in the literature

No.	Reference	Sex	Age of onset (yr)	Location	Cutaneous change	Localized hyperhidrosis
1	Pippione et al. (1976) ¹	Female	Congenital	Umbilicus	Depressed nodule	-
2	Imai and Nitto (1983) ⁴	Female	12	Leg	Grouped papules	-
3	Chan et al. (1985) ⁵	Male	15	Dorsal hand	-	+
4	Mayou et al. (1988) ⁶	Male	17	Trunk	Pigmented plaque	+
5	Ruiz de Erenchun et al. (1992) ⁷	Male	80	Trunk	-	+
6	Kopera et al. (1994) ⁸	Female	25	Forearm	-	+
7	Jung et al. (1995) ⁹	Female	10	Finger	Pigmented plaque	+
8	Parslew and Lewis-Jones (1997) ¹⁰	Male	14	Hand	-	+
9	Hong and Lee (1997) ¹¹	Female	<1	Shoulder, back, and both legs	Depressed pigmented patches	-
10	Nightingale et al. (1998) ¹²	Female	Congenital	Parieto-temporal scalp	Flesh-colored nodule	+
11	Choi et al. (1998) ¹³	Female	<1	Trunk	Grouped papules	+
12	Morris et al. (2000) ¹⁴	Female	Congenital	Forearm	Grouped papules	-
13	Vázquez et al. (2002) ²	Male	33	Trunk	Pigmented plaque	+
14	Mahdavy and Smoller (2002) ¹⁵	Female	Congenital	Perianal	Skin tag	-
15	Kawaoka et al. (2004) ¹⁶	Female	4	Forearm	-	+
16	Salama and Shwayder (2008) ¹⁷	Male	<1	Trunk	Hypopigmented patch	+
17	Kang et al. (2008) ¹⁸	Female	6	Wrist	Pigmented plaque	-
18	Dua and Grabczynska (2014) ³	Female	10	Forearm	-	+
19	Bidari-Zerehpooch et al. (2017) ¹⁹	Male	19	Umbilicus	Flesh-colored nodule	+
20	Present case (2021)	Female	7	Nape	Flesh-colored nodule	+

cision can be selected as the treatment of the choice⁹. On the contrary, when localized hyperhidrosis is accompanied along with a large skin lesion, topical treatments such as anticholinergic medications or botulinum toxin can be considered¹⁶.

Our report describes a rare case of eccrine nevus located at an unusual location. Our literature review confirms that eccrine nevus usually occurs in childhood and adolescence and has a predilection for extremities. Nevertheless, the clinical manifestation, as well as the anatomic location of eccrine nevus, can vary significantly. Therefore, dermatologists should be aware of this disease entity as a differential diagnosis and perform a diagnostic biopsy when necessary.

CONFLICTS OF INTEREST

The authors have nothing to disclose.

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