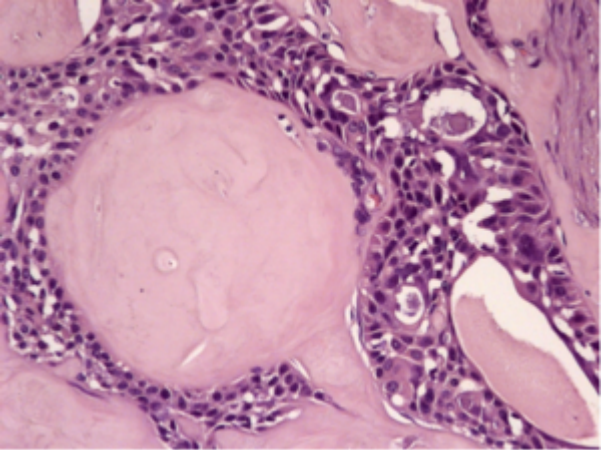
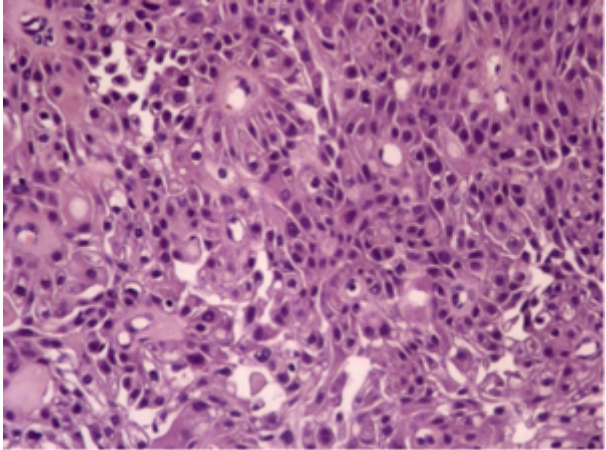
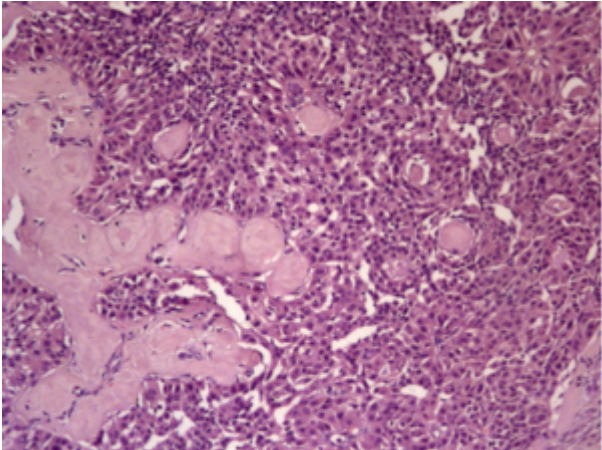
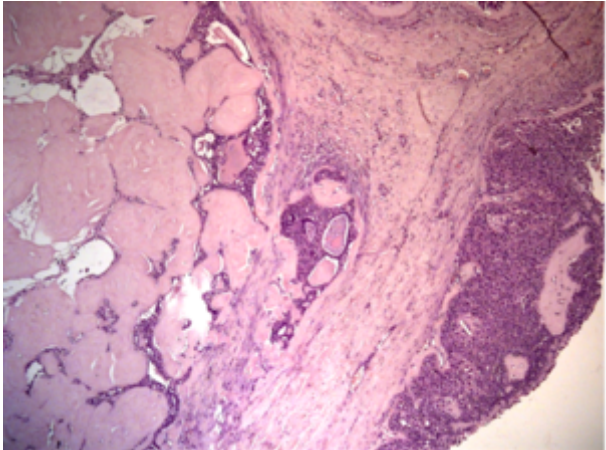
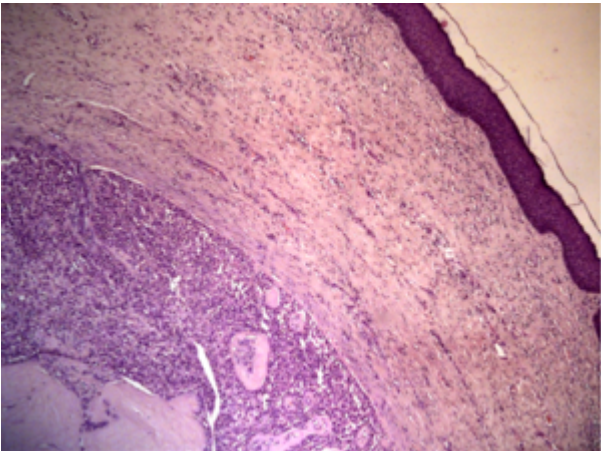
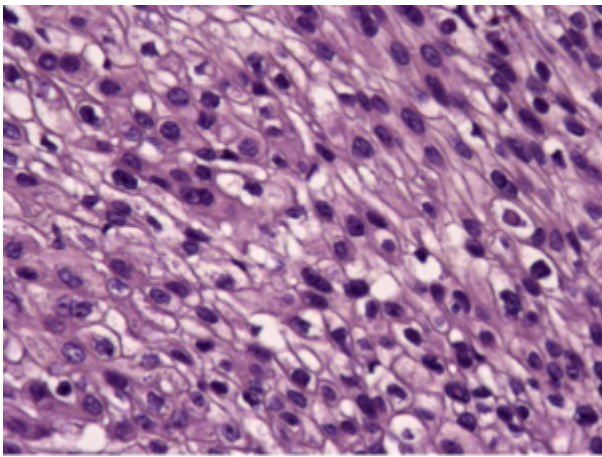


April 2015

Painful mass in the perianal area of a 62-year-old male.

What is your diagnosis?





Diagnosis:

Nodular hidradenoma.

Comment:

A 62 year-old man presented with an enlarging, painful mass in the perianal area which was surgically excised. Macroscopy showed a 5 cm round-shaped solitary lesion, without contact with the overlying skin, and with a central cystic area (Panel A). Upon histology (Panels B-H), the tumour is well-circumscribed, solid, non-encapsulated dermal mass with a cystic central area. The solid part consists of a dominant component of epidermoid cells, with faintly eosinophilic cytoplasm and round nuclei, often arranged in whorls and clear or pale cells with distinct cell membranes arranged in sheets. Cystic spaces are lined by cuboidal and columnar cells with focal evidence of apocrine differentiation. No mitotic activity is detected. The collagenous tumour stroma is sclerotic and richly vascularized.

Nodular hidradenoma is a benign tumor originating in the sweat glands, usually seen on the scalp, trunk, and proximal extremities, and rarely on the hands and feet. It rarely shows aggressive clinical behavior and malignant transformation. The lesion is very unusual finding in the perianal area, but the histological appearance is characteristic and ensures the diagnosis. Our patient received no further therapy and showed no recurrence under the 3-month follow-up to date.

This is the first nodular hidradenoma with a perianal location we encountered and the first ever reported in the literature to our knowledge. However, two cases showing the malignant counterpart have been reported, one in a male diagnosed with perianal nodular hidradenocarcinoma (1), and one in a woman with a primary vulval malignant nodular hidradenoma that extended to the perianal area (2).

A more usual finding in the perianal area is the papillary hidradenoma (hidradenoma papilliferum), a rare tumor that characteristically arises in the vulval and perianal regions, typically in middle-aged women.

Syringocystadenocarcinoma papilliferum, its malignant counterpart, usually appears in the head and neck area, in men and women equally. Langner and Ott also reported one case that developed in the perianal area (3).

For further reading:

1. Sierra Montenegro E, Sierra Luzuriaga G, Leone Stay G, Salazar Menendez V, Quinonez Auria C. Perianal nodular hidradenocarcinoma. Case report. *Cir Cir.* 2010; 78: 173-6.
2. Ghartimagar D, Ghosh A, Kumar A, Pandey MR, Talwar OP, Narasimhan R. Malignant nodular hidradenoma of vulval and perineal region: a case report. <http://dx.doi.org/10.13070/rs.en.1.1074>
3. Langner C, Ott A. Syringocystadenocarcinoma papilliferum in situ originating from the perianal skin. *APMIS.* 2009; 117, 148–50.

4. LeBoit PE, Burg G, Weedon D, Sarasain A (Eds.): World Health Organisation Classification of tumours. Pathology and Genetics of Skin Tumours. IARC Press: Lyon 2006
5. Bosman FT, Carneiro F, Hruban RH, Theise ND (Eds.): World Health Organisation Classification of tumours. Pathology and Genetics of Tumours of the Digestive system. IARC: Lyon 2010

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