

### Case Report

## A RARE CASE OF LARGE SEBORRHEIC KERATOSIS OF THE PINNA

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### ABSTRACT

Seborrheic keratosis is a benign skin tumor which arises from the proliferation of keratinocytes of the epidermis. In the ear, its most common site ranges from the retroauricular region to the helical rim of the pinna. Diagnosis is made by clinical & histopathological examination. Since the tumor is benign, treatment is not mandatory. The lesions are removed often for cosmetic reasons. We discuss here, the clinical presentation, investigations and treatment of a case of large seborrheic keratotic mass of the pinna.

**Keywords:** Benign; Skin Tumor; Seborrhoeic Keratosis; Cosmetic Treatment

### INTRODUCTION

Seborrheic keratoses are benign epithelial tumors, derived from the keratinizing stratified squamous epithelium of the epidermis and hair follicles and the ductular epithelium of cutaneous glands, often recapitulate the structures from which they arise (Mackie and Quinn, 2004; Mundra *et al.*, 2013). They characteristically appear as round, flat, coin-like, waxy plaques that vary in diameter from millimeters to several centimeter (Kumar *et al.*, 2010). Our case had a large solitary lesion over the helix of the left pinna. Literature pertaining to seborrheic keratosis in otorhinolaryngology is rare and this case report may help in diagnosis.

### CASES

A 50 year old female patient presented to the ENT OPD with a unilateral mass over the left pinna (Figure A). She noticed it 6 years back and did not seek any treatment as it was asymptomatic. It was about 3x2x4 cms in size present over the helix of pinna. It was non-tender greyish-black cauliflower-like mass which was firm in consistency. A differential diagnosis of keratoacanthoma and seborrheic keratosis was made. The mass was then completely excised under local anesthesia and tissue sent for histopathological examination (Figure B & C). Microscopy showed massive hyperkeratosis, parakeratosis, acanthosis, hyper pigmentation of basal layer, keratin horn pearls, keratotic plugging, and papillomatosis. The dermis showed infiltration of mononuclear cells and hyalinization of collagen (Figure E). There were no atypical features. A diagnosis of seborrheic keratosis –hyperkeratotic type was made.



Figure A: Mass Over Pinna



Figure B: Mass Excised



Figure C: Specimen

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Figure D: Post OP Picture

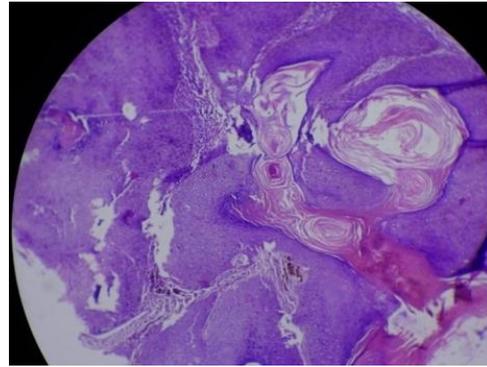


Figure E: Histopathology

### DISCUSSION

Benign epithelial tumors, derived from the keratinizing stratified squamous epithelium of the epidermis and hair follicles and the ductular epithelium of cutaneous glands, often recapitulate the structures from which they arise (Kumar *et al.*, 2010). They are sometimes confused clinically with malignancy, particularly when they are pigmented or inflamed, and histologic examination of a biopsy is frequently required to establish a definitive diagnosis (Kumar *et al.*, 2010). Its spread increases with age and can potentially affect the whole ear, including the external auditory canal (Konishi *et al.*, 2006). Ultraviolet light exposure, human papillomavirus infection, hereditary factors, action of oestrogen and other sex hormones are among those factors which have been suggested in the aetiology of this disease (Rigopoulos *et al.*, 2002). Secondary malignant changes may occur but are extremely rare. Histologically this lesion can be divided into seven subtypes: acanthotic, hyperkeratotic, adenoidal or reticulated, clonal, irritated, inverted follicular keratosis, and melanoacanthoma variants. The clinical variants are common seborrheic keratoses, dermatosis papulosa nigra, pedunculated seborrheic keratoses, flat seborrheic keratoses and stucco keratoses.

The differential diagnosis includes actinic keratoses (solar keratoses) which are brown, red or skin-colored and might show some signs of inflammation and occasional hyperkeratosis, keratoacanthoma which is a symmetric cup-shaped tumor with a central depression filled with keratin debris and epidermoplastia verruciformis a rare, heritable disease characterized by an unusual susceptibility to infection with specific types of human papilloma virus and a propensity for developing malignant skin tumors.

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