

## ◇ Case Report

〈本文p.1173～1176〉

**A case of solid and cystic hidradenoma on the right upper arm**Kikuchi, Ayane<sup>1)</sup> Hotta, Asa<sup>1)</sup> Watanabe, Tomoya<sup>1)</sup> Wada, Hidefumi<sup>1)</sup> Mohri, Shinobu<sup>2)</sup> Aihara, Michiko<sup>1)</sup><sup>1)</sup> *Department of Dermatology, Yokohama City University School of Medicine*<sup>2)</sup> *International Good will hospital***Abstract**

A 75-year-old man developed solid and cystic hidradenoma (SCH) on his right upper arm. Ultrasonography revealed nodular, anechoic soft -tissue mass in the tumor. In pathological findings, solid and cystic areas of the tumor were composed of epidermoid cells and clear cells. SCH is included in poromas and known as nodular hidradenoma or clear cell hidradenoma.

〈本文p.1177～1180〉

**A case of solid-cystic hidradenoma suspected by sonography**Shono, Yuki<sup>1)</sup> Tanaka, Takamitsu<sup>1)</sup> Shimizu, Tomomichi<sup>1)</sup> Ishikawa, Takeko<sup>1)</sup> Tada, Yayoi<sup>1)</sup> Ohnishi, Takamitsu<sup>1)</sup> Watanabe, Shinichi<sup>1)</sup><sup>1)</sup> *Department of Dermatology, Teikyo University School of Medicine***Abstract**

A 27-year-old Japanese male presented with an asymptomatic nodule on his right lower leg since 1 years ago. Physical examination revealed a dome-shaped, elastic soft, light brown, solitary nodule, 25 × 25 mm in diameter, with smooth surface. Sonographic examination revealed a unilocular cyst with intracystic papilloma-like protrusion. Histopathologic examination of the excised cyst showed solid-cystic shaped epithelium composed of epidermoid and clear cells. Sonography was useful for preoperative diagnosis in the present case.

〈本文p.1181～1184〉

**A case of a large solid-cystic hidradenoma on the left inguinal region**Arai, Madoka<sup>1)</sup> Nishizawa, Aya<sup>1)</sup> Tokoro, Shown<sup>1)</sup> Ugajin, Tsukasa<sup>1)</sup> Miura, Keiko<sup>2)</sup> Yokozeki, Hiroo<sup>1)</sup><sup>1)</sup> *Department of Dermatology, Tokyo Medical and Dental University*<sup>2)</sup> *Department of Pathology, Tokyo Medical and Dental University***Abstract**

A 54-year-old man presented with an enlarging 6cm-sized dome-shaped tumor with blue hue on left inguinal region. T2 weighted magnetic resonance images revealed a large, homogenous, and high-signal-intensity area. Contrasted magnetic resonance images shows highly enhanced small masses protruding into the cystic space. From histopathological findings, the diagnosis of solid cystic hidradenoma was made. Our case is the largest solid cystic hidradenoma in size among the previous Japanese literatures. We are speculating that both the large size and the underlying blue hue of the tumor are due to accumulated secretory fluid in the cystic space.

## ◇ Case Report

〈本文p.1185～1188〉

### Poroid hidradenoma : A case report

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#### Abstract

A 69-year-old woman visited our hospital, presenting with a palpable lesion on her nape that had persisted for 2 years. Physical examination confirmed the presence of a 13×9-mm, bluish, soft, and movable nodule covered by normal skin on her nape. The mass was excised surgically. Histopathologically, the tumor was a well-demarcated cyst in the middle and lower dermis with small solid components protruding into the cystic space and was filled with eosinophil nonstructural substance. The solid lesion was composed of small-dark poroid cells and large-paler cuticular cells. Ductular structures surrounded by the cuticular cells were detected. Some part of the cyst wall and cuticular cells were stained with anti-EMA antibody, and the composing cells were entirely stained with anti-34  $\beta$  E12 antibody. These histological features were consistent with those of poroid hidradenoma. No medical issues developed during a 4-year follow-up. Poroid hidradenoma is a poroid neoplasm, a variant of the eccrine poroma. Total excision of this tumor is required to prevent its recurrence and possible malignant transformation.

〈本文p.1189～1192〉

### A case of cystic eccrine spiradenoma on the lower leg

Moriyama, Yuki<sup>1)</sup> Hashimoto, Yuki<sup>1)</sup> Ohara, Fumiko<sup>1)</sup> Kanto, Hiromi<sup>1)</sup> Ishiko, Akira<sup>1)</sup>

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#### Abstract

A 65-year-old male presented to our department with a painful mass which persisted on his left lower leg for more than 10 years. Histologically, there were solid and cystic lesions in this tumor. It was composed of two types of cells which were dark small cells and pale large cells. The immunohistochemical study showed that the small cells were positive for p63 and the large cells were positive for CK7.

〈本文p.1193～1196〉

### Apocrine hidrocystoma of the bilateral external canthus

Kuroda, Eri<sup>1)</sup> Matsuoka, Maya<sup>1)</sup> Kimura, Satoko<sup>1)</sup> Iwado, Mika<sup>1)</sup> Yoshida, Erika<sup>1)</sup> Kawakami, Tamihiro<sup>1)</sup>  
Soma, Yoshinao<sup>1)</sup> Ito, Fumiyuki<sup>2)</sup>

<sup>1)</sup> *Department of Dermatology, St. Marianna University School of Medicine*

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#### Abstract

Apocrine hidrocystoma is a benign tumor of the skin that was first described as a clinical entity by Mehregan in 1964. Since then, over 170 cases have been reported in Japan, and 58 of those cases were located at periocular region. Most of those cases were solitary. We encountered an unusual case of a 43-year-old male of apocrine hidrocystoma that affected both of the patient's external canthus. We should consider apocrine hidrocystoma when we see small nodules at periocular area.

## ◇ Case Report

〈本文p.1197～1200〉

**A case of folliculosebaceous cystic hamartoma on the nose**Ohashi, Hiroyuki<sup>1)</sup> Kimura, Satoko<sup>1)</sup> Kadono, Takafumi<sup>1)</sup> Kawakami, Tamihiro<sup>1)</sup> Soma, Yoshinao<sup>1)</sup> Anzai, Shinichi<sup>2)</sup><sup>1)</sup> *Department of Dermatology, St. Marianna University School of Medicine*<sup>2)</sup> *Department of Dermatology, Nippon Medical School Musashi Kosugi Hospital***Abstract**

A 55-year-old woman had a papule on her nose. The papule had gradually enlarged over the previous 5 years. On physical examination, the lesion was a 7×6×4mm, pinkish, pedunculated papule located on the left nostril. Histopathological examination revealed an infundibular cyst-like structure surrounded by bundles of collagen fibers with sebaceous gland and hair follicles. The stroma contained fibrotic collagen fibers, fat cells and small blood vessels. Cleft formation between fibrillary bundles of collagen and adjacent dermis was present. We diagnosed this papule as folliculosebaceous cystic hamartoma.

〈本文p.1201～1204〉

**Two cases of folliculosebaceous cystic hamartoma**Inoue-Tsuru, Hiroko<sup>1)</sup> Doi, Kazuko<sup>2)</sup> Uchi, Hiroshi<sup>1)</sup> Furue, Masataka<sup>1)</sup><sup>1)</sup> *Department of Dermatology, Graduate School of Medical Sciences, Kyushu University*<sup>2)</sup> *Department of Dermatology, Karatsu Red Cross Hospital***Abstract**

We reported two cases of folliculosebaceous cystic hamartoma (FSCH). FSCH is a cutaneous hamartoma comprised of follicular, sebaceous, and mesenchymal elements. The first patient, a 54-year-old man, had a subcutaneous tumor of light brown on the eyebrow from two years before. The second patient, a 72-year-old woman, had a subcutaneous tumor of salmon-pink on the nose from ten years before. Both tumors were resected. Histologically, both had numerous mature sebaceous lobules connecting to an infundibular cystic cavity in the dermis. The folliculosebaceous component was surrounded by a dense collagenous stroma, characterized by cleft-like spaces.

〈本文p.1205～1208〉

**A case of paraurethral cyst in female neonate**Tachibana, Takao<sup>1)</sup> Kanameishi, Shuto<sup>1)</sup> Fujita, Mafumi<sup>1)</sup> Ichinona, Masami<sup>1)</sup> Takase, Sawako<sup>1)</sup>Nishimura, Youichi<sup>1)</sup> Ota, Miyuki<sup>1)</sup> Yagi, Yosuke<sup>1)</sup><sup>1)</sup> *Department of Dermatology, Osaka Red Cross Hospital***Abstract**

We examined a 2-day-old female neonate who was found to possess a cystic mass in front of the vaginal introitus. The mass was about the size of little finger, and located posterior to the urethral orifice because of her pee flowed anterior to the mass. In addition, the mass size was unchanged by abdominal muscle pressure, and we clinically diagnosed as a paraurethral cyst. The fenestration was done under a surface anesthesia, and the wall was consisted of not columnar or transitional epithelium but stratified squamous epithelium. Therefore, we finally diagnosed as a paraurethral cyst derived from the uterovaginal canal.

## ◇ Case Report

〈本文p.1209～1212〉

### Cases of intravascular papillary endothelial hyperplasia on the soles

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<sup>1)</sup> *Division of Dermatology, Ogikubo Hospital*

#### Abstract

Case 1. 43-year-old woman. She noticed 7mm sized blue subcutaneous nodule with a tenderness on left sole two month ago. Case 2. 37-year-old man. He felt the normal color nodule with a tenderness in his left sole the day before the first visit. There were no obvious trauma history both. Pathologically there were expanded vessel with thrombi, and the vessel has endothelial cells to proliferate papillary structure into the lumen. From the above findings, they were diagnosed as intravascular papillary endothelial hyperplasia both. Case1, one-third of lumen is occupied by solid structure which made by papillary structure. Case2 also have papillary like structure but it is arise from lumen and takes small portion of lumen. This two cases showed pathological change that related to the maturation process of intravascular papillary endothelial hyperplasia.

〈本文p.1213～1216〉

### Sonographic findings of cutaneous angiomyolipoma on the auricle

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<sup>1)</sup> *Department of dermatology, Saiseikai Tondabayashi Hospital*

<sup>2)</sup> *Department of dermatology, Asakayama General Hospital*

#### Abstract

A 42-year-old male presented to our hospital with a soft skin nodule on his left auricle. An ultrasonographic analysis showed a well-defined homogeneous, hypoechoic mass with rich intratumoral blood flow. Histopathological examination revealed an encapsulated nodular lesion which was composed of mature adipose tissue, vessels and smooth muscle cells. Immunohistochemically, the vascular endothelial cell in the tumor were positive for CD34, and the perivascular smooth muscle cell were positive for desmin and vimentin. From these findings, we diagnosed this tumor as cutaneous angiomyolipoma. Our report is the second report of the ultrasonographic findings of this tumor. This finding may assist in future diagnosis of this condition.

〈本文p.1217～1220〉

### A case of gouty tophus on the elbow diagnosed by “urate milk”

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#### Abstract

A case of 54-year-old male presented with 2-year history of subcutaneous tumor on his left elbow. Milky white liquid was revealed by the exploratory puncture under the assumption of ganglion or epidermal cyst. Light microscopic examination of the whitish liquid demonstrated a large amount of urate crystals. Such urate crystals are believed to be seen in the articular cavities or bursa of the chronic gout patients and called “Urate milk”.

## ◇ Case Report

〈本文p.1221～1224〉

**A case report of primary cutaneous adenoid cystic carcinoma of the mandible**

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**Abstract**

A 24-year-old man complained of a skin tumor on the left lower mandibular region for 6 years. One month before the first consultation, the tumor had been removed by other plastic surgeon. The tentative pathological diagnosis was adenocarcinoma. Because organ metastasis was absent, wide resection was conducted, which demonstrated that the histopathological finding was consistent with primary cutaneous adenoid cystic carcinoma (PCACC). PCACC was considered to be rare, and only less than 70 cases have been reported in the English literatures. As local infiltration was severe in PCACC, wide resection was usually recommended. Since a recurrence may occur years later, close follow up is mandatory, especially in young patients.