

## CHONDROID SYRINGOMA

(Mixed tumour of skin-salivary gland type-Report of a case  
and review of the literature)

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### Summary

A case of chondroid syringoma (mixed tumour of skin) occurring in the breast of a 40 years old female is being reported because of its rare location. The histogenesis of this benign tumour has been discussed.

KEY WORDS : Chondroid Syringoma.

### Introduction

Chondroid syringoma is a rare lesion consisting of pleomorphic cellular components and chondroid or myxomatous matrix. About 300 cases of this tumour have been described in the world literature after Nasse recorded the first case as mixed tumour of skin in 1892<sup>1</sup>. It occurs most often as intradermal or subcutaneous module in face and head regions and less commonly over the trunk, axilla and extremities. The lesion is mostly asymptomatic. Occasionally, trauma or infection direct the patient's attention to the area. These tumour occur commonly in fifth decade. Kartha et al<sup>2</sup> reported the incidence and histological features of seven cases of benign mixed tumour of skin encountered in the department of Pathology, All India Institute of Medical Sciences, New Delhi and collected twelve cases reported by

different workers in the Indian literature<sup>3,7</sup>. Gupta & Mediratta<sup>8</sup> have also described four cases of chondroid syringoma in 1980. Only four cases in the large series of 188 cases of chondroid syringoma reviewed by Hirsh & Helwig<sup>9</sup> were in the breast area. We report here one case of chondroid syringoma in the breast area because of its rare location.

### Case Report

A 40 years old female was admitted in November, 1981 in the surgical ward of the Rajendra Hospital, Govt. Medical College, Patiala with the chief complaint of lump in the left breast. The local examination revealed an oval, hard nodule measuring 2.5 cm. in diameter in the outer and lower quadrant of the left breast. The tumour mass was excised and sent for histopathological examination.

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### Gross appearance

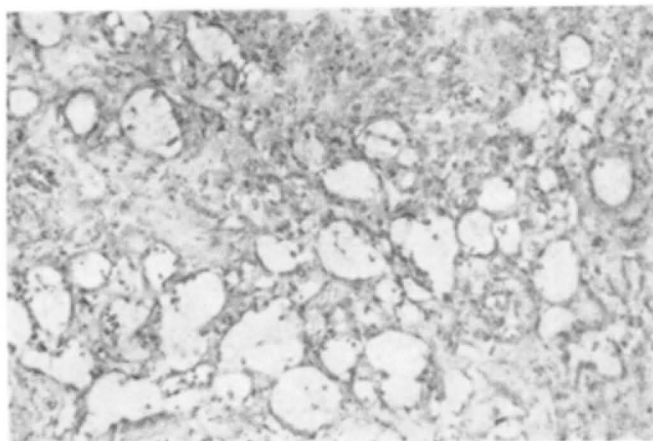
The specimen was circumscribed and 2 cm in diameter. The cut surface was greyish white in colour.

### Microscopic examination

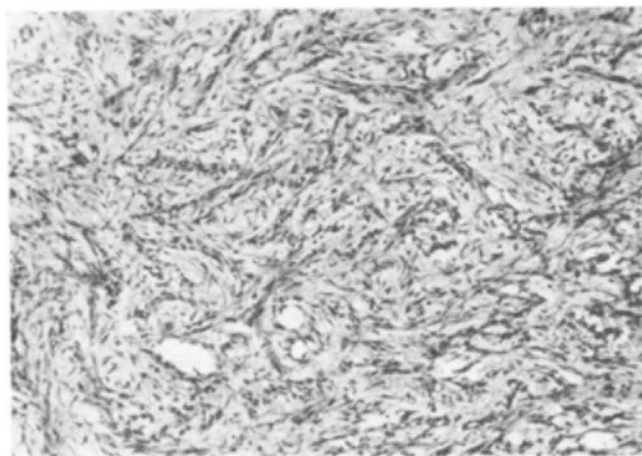
The multiple paraffin sections prepared from the tumour mass and

stained by haematoxylin and eosin showed tubular and cystic spaces lined by two layers of epithelial cells; a luminal layer of cuboidal cells and a peripheral layer of flattened cells (Fig. 1). Aggregates of epithelial cells without lumina were also seen widely

dermatologists and pathologists for many years. The first case seems to have been reported by Nasse in 1982<sup>1</sup>. Hirsh & Helwig<sup>9</sup> reviewed 188 cases of mixed tumour of skin which they encountered at the Armed Forces Institute of Pathology, Washington and



**Fig. 1**  
Microphotographs showing tubular & cystic spaces lined by epithelial cells. (H & E  $\times$  70)



**Fig. 2**  
Microphotographs showing aggregates of epithelial cells without lumina & the stroma showing mucoid appearance. (H & E  $\times$  70)

scattered through the stroma. The stroma in many areas was mucoid in appearance (Fig. 2).

Histological diagnosis of Chondroid syringoma (mixed tumour of skin) was made.

**Discussion**

Mixed tumour of skin has been a subject of curiosities for surgeons,

termed this tumour as chondroid syringoma, the term retained in international histological typing of skin tumours of W.H.O.<sup>10</sup>

Histologically, two types of this tumour can be recognised; one with tubular and cystic partially branching lumina and other with small tubular lumina. Headington<sup>11</sup> postulated that the tumours with tubular lumina were

apocrine in type and those with small ductal lumina were eccrine. However, most authors believed that both the types arise from the ducts of eccrine sweat gland<sup>9,12,13</sup>. It is generally agreed that the epithelial cells of mixed tumours induce the mucinous changes in the stroma.

Chondroid syringoma of skin is generally benign and does not recur, if excision is complete. A true malignant mixed tumour of skin with metastasis is extremely rare. Hiltron and Blackwell<sup>14</sup> described one such and could trace only four other cases of chondroid syringocarcinoma in the literature.

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