

ERUPTIVE SYRINGOMA

Vidyadhar R Sardesai, Mohan B Gharpuray

Eruptive syringoma is an appendageal tumour of intraepidermal eccrine sweat duct. A 20-year-old male patient presented with multiple, asymptomatic papules over anterior aspect of neck, chest and shoulders. Histopathological study of skin biopsy specimen revealed features of syringoma.

Key words: Syringoma, Eruptive syringoma

Introduction

Syringoma is a benign appendageal tumour of intraepidermal eccrine sweat duct. In eruptive syringoma or so called eruptive hidradenoma of Darier and Jaquet, the lesions often arise in the first decade in large numbers and in successive crops on the anterior neck, chest and abdomen and either remain stationary throughout life or disappear¹. Eyelids may or may not be involved in this type. They are involved in the common type. There is also a familial variant.^{2,3}

Case Report

A 20-year-old male presented with multiple, asymptomatic skin lesions of 2 years duration. Lesions started erupting over the chest, spreading to the anterior neck, arms and upper back. A few lesions also appeared over the thighs. There was no history of drug intake and no similar complaint in the family. Examination revealed skin-coloured papules in the above mentioned areas (Fig.1). Biopsy from

lesion over shoulder showed normal epidermis. In the dermis, cystically dilated duct filled with keratin was seen at one place. In the same area ducts lined by double layered epithelium, solid nests and cords of cells were seen (Fig.2). With the histologic evidence and clinical history and appearance a diagnosis of eruptive syringoma was made.



Fig.1. Eruptive syringoma



Fig.2. Syringoma: histopathology

Address correspondence to:

Dr. Vidyadhar R. Sardesai
11, Mulay Chambers, Laxmi Road
419, Narayan peth, Pune 411030.

Discussion

Histochemical studies have shown that all eccrine type of enzymes and glycogen are present in the tumour cells of syringoma. Eccrine specific monoclonal antibody (EKH6) positively stains syringoma lesions. Hence although formerly thought to be of mixed origin, now syringoma is considered to be benign appendage tumour of intraepidermal eccrine sweat duct. Histopathology shows numerous small cystic ducts and solid epithelial strands present in upper and mid dermis, embedded in a fibrous stroma. In some ducts, outer wall cells bulge out to form a small comma-like

excrescence (tadpole appearance). In serial sections, cystic ducts connected with dilated cysts of intraepidermal duct may be found. No connection with secretory segments is found.

References

1. Hashimoto K. Eruptive hidradenoma and syringoma: Histological, histochemical and electron microscopic studies. *Arch Dermatol* 1967;96:500.
2. Yesudian P, Thambiah A. Familial syringoma. *Dermatologica* 1975;150:32.
3. Hashimoto K. Familial syringoma: Case history and application of monoclonal antieccrine antibodies. *Arch Dermatol* 1985;121:756.