

## CASE REPORTS

### ACQUIRED DIGITAL FIBROKERATOMA

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A 25-year-old male presented with asymptomatic dome-shaped papule on the base of the left index finger which was diagnosed clinically as acquired digital fibrokeratoma. The lesion was excised and histopathology corroborated the clinical diagnosis.

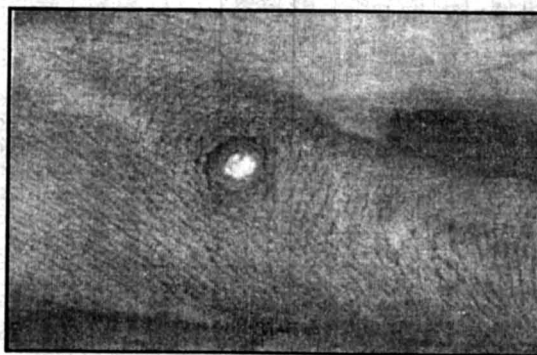
**Key words:** Acquired digital fibrokeratoma

#### Introduction

Acquired digital fibrokeratoma (ADFK) is a benign lesion which occurs on the fingers and toes<sup>1</sup> and occasionally on the palms and soles.<sup>2</sup> Trauma is thought to be a precipitating factor in some cases.<sup>2</sup> Clinically the lesion usually occurs in adults as a dome shaped papule, though it may be elongated or pedunculated.<sup>2</sup>

#### Case Report

A 25-year-old male presented with a 3-year history of single asymptomatic solid papule on dorsal aspect of left index finger. There was no history of any preceding trauma. The lesion increased in size for initial 5 months and remained static thereafter. Clinical examination revealed a single skin coloured, 0.5 cm dome shaped papule with slight central depression on the dorsal aspect of the



**Fig. 1.** Acquired digital fibrokeratoma. Note dome-shaped papule with slight central depression on the base of left index finger.

base of left index finger (fig. 1). Histopathological examination demonstrated hyperkeratosis and acanthosis of the epidermis and the core of the lesion was formed of interwoven bundles of collagen predominantly oriented along the long axis of the lesion.

#### Discussion

Acquired digital fibrokeratoma is a benign

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lesion which presents as a dome-shaped papule. It may be elongated or pedunculated. It usually has a collarette of slightly raised skin at its base. Occasionally the surface may appear warty. Differential diagnoses include dermatofibroma, viral warts, supernumerary digit and cutaneous horn. Histopathological examination usually reveals thick interwoven dermal collagen bundles oriented along the vertical axis of the lesion. There is an increase in vascularity of the lesion. Occasionally

there is an obvious increase in fibroblasts and rarely the collagen bundles may be separated by edema.<sup>2</sup> Surgical excision is the treatment of choice.

## References

1. Berger RS, Spielvogel RL. Dermal papule on the distal digit. *Arch Dermatol* 1988; 124:1559.
2. Kint A, Baran R, De Keyser H. Acquired (digital) fibrokeratoma. *J Am Acad Dermatol* 1985; 12:816-21.