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RESEARCH ARTICLE

THE PILOMATRICOMA: A CASE REPORT OF PALPEBRAL LOCALIZATION

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Abstract

Pilomatricoma, formerly called calcified epithelioma of Malherbe, is a rare and benign skin tumor occurring during the first two decades of life, generally located in the upper part of the body (neck and head). In its typical form, it manifests clinically as a small, solitary, asymptomatic, sometimes painful subcutaneous nodule. The usual size is less than 3 cm. The diagnosis is made clinically and requires histological confirmation. The prognosis is generally good. Carcinomatous transformation remains controversial. Healing without recurrence is the rule after surgical excision. Ocular or palpebral localization is exceptional. We report the case of Mrs. G.E, 26 years old, without any notable pathological history, who consulted for a mass on the right eyelid that had been developing for 1 year. Objective clinical examination: a polylobed mass, well defined, 3 cm long axis, hard, painless and mobile in relation to the deep plane. The surrounding skin is normal in appearance. In addition, motor skills and ocular mobility remain preserved. A total surgical excision is performed. Histological study of the biopsy specimen reveals the presence of basaloid cells covering layers of mummified cells with eosinophilic cytoplasm, suggestive of a Malherbe Pilomatricoma. No recurrence was detected after a 12-month follow-up.

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Introduction:-

Pilomatricoma, previously known as calcified epithelioma of Malherbe, is indeed a rare and benign skin tumor. It typically manifests in individuals within the first two decades of life, with a predilection for occurring in the upper part of the body, particularly in the head and neck region. In its typical form, it manifests clinically as a small, solitary, asymptomatic, sometimes painful subcutaneous nodule. The usual size is less than 3 cm. The diagnosis is made clinically and requires histological confirmation. The prognosis is generally good. Carcinomatous transformation remains controversial. Healing without recurrence is the rule after surgical excision. Ocular or palpebral localization is exceptional.

Patient & Observation:-

We report the case of Mrs. G.E, 26 years old, without any notable pathological history, who consulted for a mass on the right eyelid that had been developing for 1 year. Objective clinical examination: a polylobed mass, well defined,

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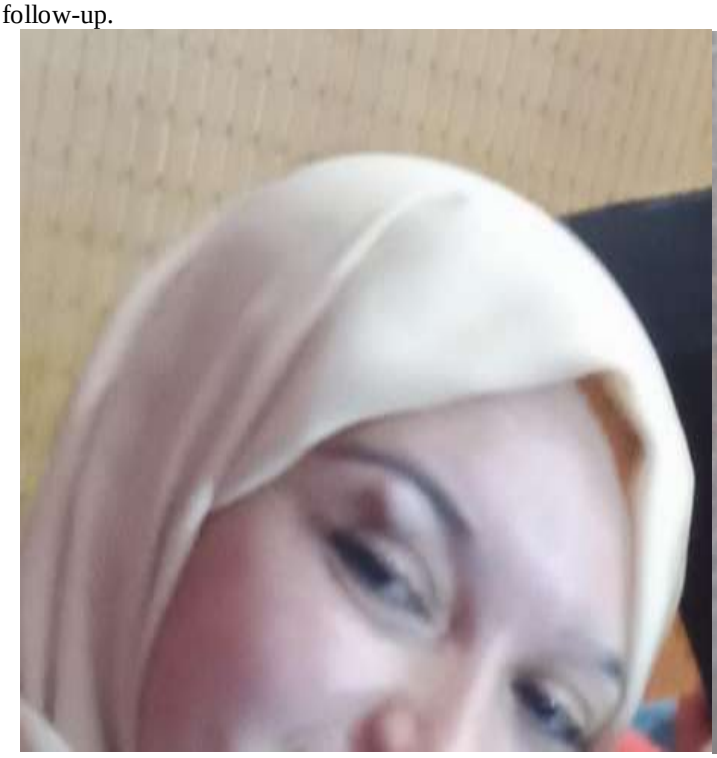

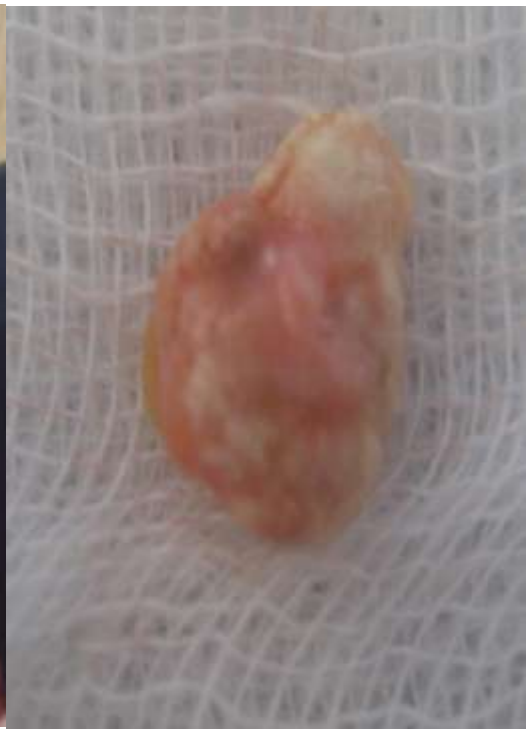

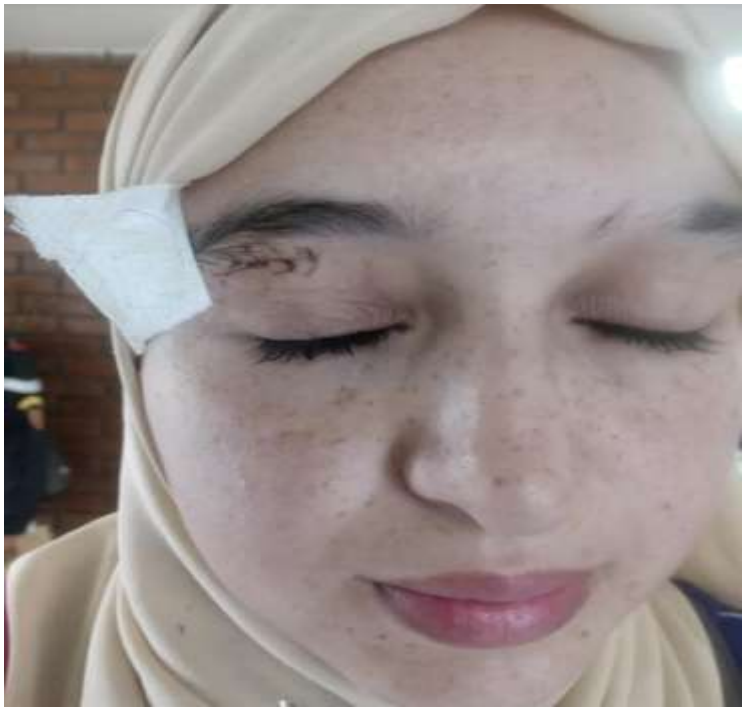

Discussion:-

The Pilomatrixoma is an uncommon lesion that arises from the matrix cells at the base of the hair. It was first described by Malherbe as benign calcifying epithelioma.[2] Subsequently numerous ultrastructural and electron microscopic studies[3,4] provided strong evidence of its origin from the hair matrix cells and the term "pilomatrixoma" was then coined by Forbis and Helwig keeping the histogenesis into consideration.[1] Pilomatricoma typically presents as an asymptomatic round or oval irregular subcutaneous nodule of hard or firm consistency. The skin next to the lesion is often bluish.

On inspection, the Pilomatricoma has one or more flat faces separated from each other by angular lines giving the impression of a tent. This sign is often highlighted by stretching the skin and looking for the existence of angles or facets. It could be related to the amount of calcium deposited in the tumor. Pilomatricoma can take different clinical forms and be perforating, ulcerated, anetoderma with erythematous skin next to the lesion or pigmented [1, 2]. This explains the diagnostic errors found in the literature. In our patient, the skin on the other side was normal. [5] The difficulty of clinical diagnosis is based on the variable clinical appearance of Pilomatricoma and the lack of knowledge of this tumor by certain clinicians. The diagnosis of Pilomatricoma must remain clinical, confirmed by the histology which allows certain differential diagnoses to be eliminated, mainly epidermoid and pilar cysts but especially malignant Pilomatricoma [3,4].

The treatment for Pilomatricoma is complete surgical excision removing a skin spindle, especially if the lesion is adherent to the dermis. This is the standard treatment to prevent the majority of recurrences [4] . The prognosis for Pilomatricoma is good. Healing without recurrence is the rule after total surgical excision.

Conclusion:-

Pilomatricoma is a rare benign tumor arising from the hair matrix. Localization at the palpebral or ocular level remains exceptional. The histological diagnosis will exclude a malignant Pilomatricoma. The prognosis is generally good. Carcinomatous transformation remains controversial. Healing without recurrence is the rule after total surgical excision.

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