



DERMATOLOGICAL SURGERY

CLARITY WITH GRANULARITY- A RARE CASE REPORT

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BACKGROUND: Granular cell myoblastoma is an uncommon mostly benign neoplasm named after Abrikossoff. This mesenchymal neoplasm supposedly arises from the Schwann cells. Most commonly presents as asymptomatic swelling in Gastrointestinal tract and skin. Histologically in the dermis polyhedral cells with round vesicular nucleus with eosinophilic granular cytoplasm is seen.

OBSERVATION: A 45 year old male autodriver by occupation presented to us with a solitary lesion over back since six months. The lesion was associated with pain and the lesion gradually increased in size. On examination A solitary well defined tender circular plaque with central ulceration measuring 3cm in diameter present over upper back. There was no regional lymphadenopathy and no other mucocutaneous findings. Microscopic examination shows tumour cells in sheets with abundant granular cytoplasm, vesicular nucleus with prominent nucleoli with minimal pleomorphism with mitosis of <2/10hpf. Tumour cells were strongly positive for NSE. Ki67 shows mitosis of 40/10hpf. The patient was treated with Z plasty and was followed up for 1 year there was no recurrence.

KEY MESSAGE: Our case presented with a well-defined painful ulcerated lesion which can be easily confused with keratoacanthoma, Squamous cell carcinoma and lupus vulgaris ulcerative variant. We considered different painful dermal adnexal tumors as differential diagnoses. However, typical histopathological findings indicated a diagnosis of Granular Cell Tumor. Even though GCT is a rare neoplasm, it should be ruled out in cases of a solitary plaque with ulceration.

