Introduction: Granulomatous Skin Diseases (GSD) represent an extensive group of pathologies whose diagnosis usually requires a histopathological examination. At this level, various types of granulomas can be distinguished, namely tuberculoid, sarcoid, necrobiotic, suppurative, xanthogranuloma or foreign body granulomas.

Objectives: The present study aimed to determine the frequency and pattern of the various GSD in our hospital, to evaluate the degree of concordance between the clinical diagnosis and the histopathological findings and finally to compare our results with those obtained in other similar studies.

Material and Methods: A retrospective study of the last 10 years (2008-2017) was performed, and all biopsies referring to cutaneous granulomatous pathology were selected. Clinical and histopathological characteristics of the selected cases were analysed and the lesions were categorized according to histological type of granuloma and etiology. Foreign body granulomas secondary to ruptured cyst, folliculitis or suture material were excluded.

Results: Out of a total of 51236 cutaneous biopsies performed between 2008 and 2017, 481 (1%) corresponded to granulomatous lesions. In the analysis according to the type of granuloma, necrobiotic granulomas were the most frequent (27%, N = 128), followed by sarcoid (16%, N = 76), tuberculoid (11%, N = 55), suppurative (11%, N = 51), foreign body (9%, N = 41) and xanthogranulomas (6%, N = 27). The remaining 20% corresponded to miscellaneous granulomas. During these 10 years, the most frequent etiology was granuloma annulare (23%; N = 113), followed by sarcoidosis (11%; N = 51).

Conclusions: Histopathology is fundamental in the diagnosis of GSD, allowing categorization of the various types of granulomas and often guiding the investigation of these patients. In our study, the most frequent causes of GSD were granuloma annulare and sarcoidosis. Geographical location has an important influence on the types of granulomas observed, as evidenced by comparing our study with others.