



DERMOSCOPY AND SKIN IMAGING

## **POROID HIDRADENOMA: FIRST IN VIVO REFLECTANCE CONFOCAL MICROSCOPIC DESCRIPTION OF A RARE TUMOR**

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Background: Poroid hidradenoma (PH) is a rare, benign adnexal neoplasm usually presenting as a solitary, well circumscribed, asymptomatic nodule. PH appears slightly reddish and occasionally associates local tenderness. Since 1990, 20 cases of PH have been reported in the literature. We present a patient with a PH with rapid growth on the medial surface of the right thigh and we describe, for the first time, the dermoscopic and reflectance confocal microscopic (RCM) features in correlation with histology.

Observation: A 67-year-old woman with unremarkable family or past medical history presented to our department with a nodular lesion on the medial surface of her right thigh. The lesion had appeared 4 months earlier and rapidly enlarged over this period. Physical examination revealed a 7x5 mm, non-tender, reddish tumor with clinically distinct margins. Differential diagnosis included basal cell carcinoma, an adnexal tumor, pyogenic granuloma, and melanoma. Dermoscopy showed central blue-grey clods, a peripheric polymorphous vascular pattern with arborizing, glomerular and hairpin vessels separated by whitish septae. RCM was performed in order to obtain additional information prior to surgical excision. RCM examination revealed an ovoid, well-outlined tumor, with a central area containing cells with bizzare morphologies, and tumoral strips connected to the epidermis, radiating from the center of the lesion, which were separated by rectilinear vessels contained in the stroma. These findings correlated very well with features seen histologically, which confirmed the diagnosis of poroid hidradenoma.

Key message: Poroid hidradenoma is the newest addition to the group of poromas. PH rarely becomes malignant in less than 1% of cases, but it can be easily misdiagnosed as a malignant tumor. Even though the diagnosis of PH remains histopathological still, non-invasive tools such as dermoscopy and RCM can help rule out the diagnosis of melanoma and non-melanoma skin cancers, therefore reducing surgical associated comorbidity.

