



DERMOSCOPY AND SKIN IMAGING

PULPARY GLOMUS TUMOR: CLINICAL ASPECT, DERMOSCOPIC FEATURES AND SURGICAL TECHNIQUE

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Background: Glomus tumor is a rare benign vascular tumor which represent from 1 to 5% of soft tissue tumors of the hand. It most commonly occurs on subungual regions. It is usually solitary.

Observation: A 57- year-old woman presented with a three- month history of severely painful right middle finger. The pain was exacerbated by the cold. She complained of a major impact on her daily activity. She denied any history of trauma. On physical examination an erythematous papule of the pulp was observed which was sensitive to gentle touch. Plain radiography showed no abnormalities. The dermoscopic examination revealed a purplish pink homogenous pattern. Surgical excision was undertaken under local anesthesia. The histopathological examination confirmed the diagnosis.

Key message: Glomus tumors are derived from glomus bodies in the reticulum of the dermis. They are commonly related to the nail bed. The patient usually presents with a visible or sometimes only palpable subungual severely painful tumor. Paroxysmal pain, focal tenderness and hypersensitivity to cold is a classic triad of symptoms. Plain X-rays exam is usually irrelevant. MRI is particularly useful especially in cases of unexplained nail pain to reveal the presence of such tumor. Dermoscopic signs of this lesion have been rarely described. It may reveal the presence of a vascular pattern. Surgical excision is the standard treatment as it allows a histopathological examination of the tumor. Different surgical techniques are performed according to its localization. Nail deformity is the complication to avoid.

