

A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

PAEDIATRIC DERMATOLOGY

NINETEEN SIMULTANEOUS PILOMATRIXOMAS NOT ASSOCIATED TO SYSTEMIC SYNDROMES: A CASE REPORT

R Sanchez-perales ⁽¹⁾ - R Castro-rodriguez ⁽²⁾ - P Alvarez-castillo ⁽²⁾ - M Escudero-loayza ⁽²⁾ - M Onofre-apaza ⁽²⁾ - K Zavala-urteaga ⁽²⁾

Hospital Militar Central, Dermatology, Lima, Peru⁽¹⁾ - Instituto Nacional De Salud Del Niño San Borja, Dermatology, Lima, Peru⁽²⁾

Background: Pilomatrixoma is a tumor that derives from the hair follicle matrix, usually solitary, slow-growing and benign nature. It usually presents within first two decades of life, appearing in up to 94% of cases in the head, neck and upper extremities. The multiple presentation of these tumors is rare and may be related to systemic syndromes.

Observation: A 1 year 7 months-old boy, since 4 months-old he presented nodular lesions on the scalp and face, which started appearing in the occipital region and increased in number and size progressively, while some of them partially resolved. Nineteen skin-colored nodules were found, ranging between 1 to 4 cm in diameter, somewhat erythematous on the surface, mobile, not attached to deep planes, painless on palpation, distributed on the scalp and face. There was no evidence of muscle weakness. Patient's skull X-ray showed no bone involvement and soft tissue ultrasound revealed nodules of possible inflammatory origin. Three excisional biopsies were performed and showed macroscopic and microscopic findings consistent with pilomatrixomas. Complementary studies, serum calcium and urine calcium were normal, fecal occult blood test was negative, electromyography showed normal results. Neurological, gastroenterological and genetic evaluations were also requested, which did not report associated conditions. The therapeutic management was gradual surgical excision of all the lesions.

Key message: The presentation of multiple pilomatrixomas is rare and usually reported to be associated with systemic syndromes. The patient long-term follow-up is necessary to rule out any associate condition. On the other hand, once multiple pilomatrixomas have been diagnosed, therapeutic management is challenging.





