SKIN CANCER (OTHER THAN MELANOMA)

PRIMARY IDIOPATHIC CUTANEOUS NEUROMAS A RARE ENTITY TO BE ACKNOWLEDGED

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Background: Benign peripheral nerve sheath tumors are hyperplastic proliferations of the components of peripheral nerves. Multiple cutaneous neuromas are uncommon. They are either idiopathic or associated with multiple endocrine neoplasia (MEN) 2B and phosphatase and tensin homolog (PTEN) tumor hamartoma syndrome (PTHS).

Observation: A 24 year old male presented with multiple skin coloured lesions on extremities and genital areas, asymptomatic except for sudden spasmodic pain on tapping. Earliest lesion was noticed 15 years back on his left foot, gradually increased in size. Sudden exacerbation in the number in the past 3 years.

Examination: multiple well-defined discrete skin coloured soft, non-tender, papules and nodules distributed over the acral areas, especially the finger tips and palms, sides of toes and around the malleoli. Similar lesions over the glans penis, few discrete lesions over the nose and back.

Rest medical history unremarkable, no sensory motor impairment.
No significant family history.

Differential diagnosis: Granuloma annulare, Histoid Hansens disease, sarcoidosis.

histopathology: well circumscribed non epithelial neoplasms made up of oval and spindle shape cells, filling up most of the dermis. Cells arranged in the pattern of large nodules with linear bundles resembling nerve twigs. Numerous thin fibrillary collagen fibres present between the cells of the neoplasm. Thick walled capillaries. Overlying papillary dermis and a few appendages spared, suggestive of a palisaded encapsulated neuroma.
Thyroid functions, adrenal functions, and USG abdomen, all of which were unremarkable. Blood pressure: within normal limits.

Discussion: The present case of multiple cutaneous palisaded encapsulated neuromas is a rare presentation and deserves acknowledgement because of the following characteristics: (1) early onset; (2) only cutaneous involvement (3) isolated clinical features without any

other abnormalities or family history. After reviewing the literature, we concluded that our patient has an extremely unusual acquired condition with very few cases reported.