



A RARE CASE OF TRICHOFFOLLICULOMA INVOLVING EYELID MARGIN

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Abstract

Trichofolliculoma represents an uncommon hamartoma of hair follicle tissue, classically involving face, neck and scalp. Trichofolliculoma involving eyelid margin is very rare and only three such cases have been reported. Other rare site being vulva. We report such a rare occurrence of this hamartoma over eyelid margin in a 55 years old lady.

Key words: Trichofolliculoma, hamartoma, eyelid margins.

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Introduction:

Trichofolliculoma is a rare benign tumor of the skin, occurring most often in young adults with predilection for face, scalp, neck and very rarely the eyelid margins.¹ It is a hamartoma of the pilosebaceous follicle, where in several hair being formed within the follicular opening and all protruding onto the epidermal surface from a single pilosebaceous orifice.^[2-6] Clinically they present as small, raised nodules with two or three hairs protruding together in a small tuft through a central orifice.

Case report:

A 55 year old lady hailing from a village near Gulbarga, North Karnataka, India, presented to a private skin clinic (Dr Badad Skin Care Centre) with history of small raised nodule over her left upper eyelid since 35 years. Initially the lesion was small of the size of mustard seed which gradually increased in size to the present size. The lesion was

asymptomatic previously but later she complained of mechanical obstruction to vision. Examination revealed a solitary round skin coloured nodule measuring 3.5mm in diameter, situated over left upper eyelid margin. Surface of the lesion showed tuft of hair (both mature & immature) coming out through central orifice (fig.1). Vision was 6/12 in both eyes. All the hematological, biochemical and urinary investigations were within normal limits. Skin biopsy taken from the lesion revealed dilated and abnormally large pilosebaceous canal consisting numerous, poorly formed hair, with several pilosebaceous-like structures opening into the canal. She was counselled and treatment offered in the form of surgery. However patient denied surgery after she was explained about the complications.

Discussion:

The trichofolliculoma is a rare benign adnexal hamartoma of the skin with differentiation to hair production.⁷ The eyelids contain many hair follicles,

and they are a possible site of this tumour. Trichofolliculomas are small rounded tumours of variable size (2-5 mm in diameter) with neat margins and pink colour. They show a wool-like wisp of immature hair emerging from a central orifice.⁴

Most cases occur in young adults with predilection for the head and neck, particularly the face. Rarely may involve eyelids.^{8,9} Occasionally, tumours may develop in the vulva.¹⁰ The histological features include secondary hair follicles derived from a primary hair follicle filled with keratin lamellae and hair.¹ The lesional hair undergo evolutionary changes similar to those of the normal hair follicle.¹¹ Malignant change has been reported in a single case with perineural invasion.¹²

Our case had all the clinical features of the trichofolliculoma reported in the literature.¹⁻⁶ Only three cases of eyelid margin trichofolliculomas have been reported. Some cases may lack the characteristic wool-like wisp of immature hair and may be mistaken for basalioma.⁸ Other differential diagnosis being basal cell carcinoma.¹³ The trichofolliculoma lead to disfigurement, and the pulling away of hair and other injuries may cause inflammatory reactions. Recurrence of the lesion has been reported especially after intralesional steroid injection.¹⁴ Thus surgical excision is the best treatment.¹⁵



Conclusion: Trichofolliculoma is a rare benign tumor of the skin, commonly seen in young adults having predilection for face, scalp, neck and very

rarely can involve the eyelid margins. Surgical excision remains the mainstay of treatment.

References:

1. Gray HR, Helwig EB. Trichofolliculoma. Arch Dermatol 1962; 86: 619-25.
2. Hyman AB, Clayman SJ. Hair follicle nevus. Arch Dermatol 1957; 75: 678-84.
3. Kligman AM, Pinkus H. The histogenesis of nevoid tumors of the skin. Arch Dermatol 1960; 81: 922-30.
4. Pinkus H, Sutton RL Jr. Trichofolliculoma. Arch Dermatol 1965; 91: 46-9.
5. Plewig G. Sebaceous trichofolliculoma. J Cutan Pathol 1980; 7: 394-403.
6. Sanderson KV. Hair follicle naevus. Trans St John's Hosp Dermatol Soc 1961; 47:154-6.
7. Lever WF, Schaumburg-Lever G. Histopathology of the Skin, 5th ed. Philadelphia: Lippincott, 1975.
8. B. Carreras JR, Lopez-Marin JR, V. G. Mellado, M. T. Gutierrez ;Trichofolliculoma of the eyelid;British Journal of Ophthalmology, 1981, 65: 214-215.
9. Peterdy GA, Huettner PC, Rajaram V et al. Trichofolliculoma of the vulva associated with vulvar intraepithelial neoplasia: report of three cases and review of the literature. Int J Gynecol Pathol 2002; 21: 224-30.
10. Schulz T, Hartschuh W. The trichofolliculoma undergoes changes corresponding to the regressing normal hair follicle in its cycle. J Cutan Pathol 1998; 25:341-53.
11. Stern JB, Stout DA. Trichofolliculoma showing perineural invasion: trichofolliculocarcinoma? Arch Dermatol 1979; 115: 1003-4.
12. Morton AD, Nelson CC, Headington JT, Elner VM; Recurrent trichofolliculoma of the upper eyelid margin; Ophthal Plast Reconstr Surg. 1997;13(4):287-8.
13. Armijo M, Herrera E, Naranjo R, Camacho F, De Dulanto F. Trichofolliculoma. Acta Derm Sifilograf 1978; 9-10: 265-72.
14. Steffen C, Leaming DV. Trichofolliculoma of the upper eyelid. Cutis 1982; 30: 343-5
15. W Simpson, A Garner and J R Collin. Benign hair-follicle derived tumours in the differential diagnosis of basal-cell carcinoma of the eyelids. A clinicopathological comparison. Br J Ophthalmol 1989 73: 347-353

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