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APOCRINE HIDROCYSTOMA OF THE EXTERNAL AUDITORY CANAL MASQUERADING AS MALIGNANT MELANOMA: A CASE REPORT

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Introduction

Apocrine hidrocystomas are benign cystic proliferations of the apocrine secretory glands. ^[2] Apocrine hidrocystomas of the external auditory canal are very rare ^[3] The actual incidence of apocrine hidrocystomas in the external auditory canal is unknown and only few case reports exist in literature. ^[3] We report a case of apocrine hidrocystoma of the external auditory canal. Owing to its atypical site of presentation and blue black hue, an initial clinical diagnosis of malignancy was made.

Case Presentation

A 45 year old female patient presented with history of reccurent ear discharge and mild hearing loss in the right ear. She also felt a mass in the ear during cleaning. On otoscopy, a mass with blueblack hue was seen in the external auditory canal. The mass was partly obstructing the external auditory canal. Audiometry showed conductive hearing loss. The mass was surgically removed and sent for histopathological examination.

Gross: Received multiple cystic soft tissue pieces measuring 1x2x2cm with blueblack discoloration. The watery colored secretion was seen on cut section.

Microscopic Examination: Multiple cysts were seen in the dermis. The cysts were lined by cuboidal epithelium resting on myoepithelial cells. In close vicinity to the cyst were groups of apocrine glands, partly dilated, showing eosinophilic decapitation secretions. The stroma in many places showed severe melanin pigment deposition.

Conclusion

We have described an unusual site of presentation of apocrine hidrocystoma, the incidence of which is as yet unknown. This article will be of great interest to the readers owing to the rarity of site of presentation and mistaken clinical diagnosis of malignant melanoma Apocrine hidrocystomas usually occur as a translucent, cystic nodules in areas like face and scalp [2] This case was in the external auditory meatus and clinically appeared as a pigmented swelling leading to a clinical diagnosis of melanoma. The rarity of the tumor and the atypicality of the site was primarily responsible for the confusion and misdiagnosis. Though the tumor was cystic, however on clinical palpation it appeared more like a soft tissue tumor. We represent this case not only because of misleading clinical diagnosis but also because of its rarity. An extensive medline search failed to reveal its true incidence and only few case reports are available.

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Figure Legends:

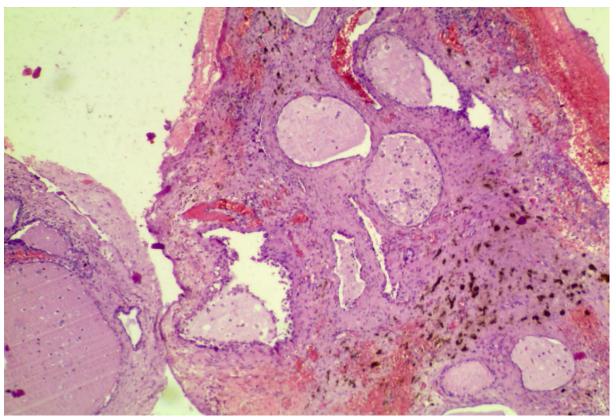


Figure 1: Hematoxylin and eosin stained section, 10x magnification Showing the cysts with a focus of melanin pigment deposition

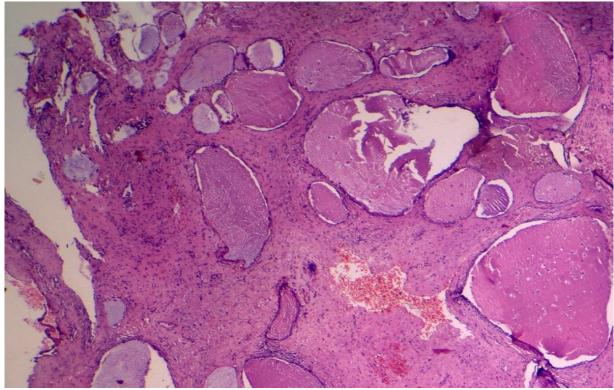


Figure2: Hematoxylin and eosin stain, 10 x magnification Showing the double lined cysts with its contents

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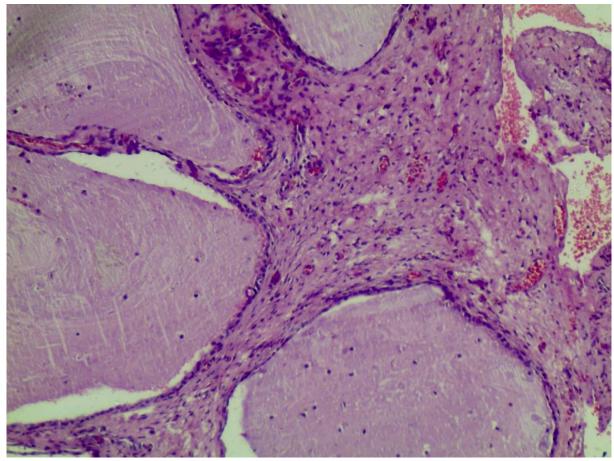


Figure 3: Hematoxylin and eosin stain, $40 \times magnification$ Showing the double lined cysts with its contents

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