

Bilateral ear canal eruptive skin tags in an otherwise healthy young lady: a case report

Farhad Handjani, MD ¹
Nasrin Saki, MD ¹
Fatemeh Sari Aslani, MD ²
Sina Kardeh ³

1. *Cutaneous Leishmaniasis Research Center, Department of Dermatology, Shiraz University of Medical Sciences, Shiraz, Iran*
2. *Department of Pathology, Shiraz University of Medical Sciences, Shiraz, Iran*
3. *Student Research Committee, Shiraz University of Medical Sciences, Shiraz, Iran*

Corresponding Author:
Nasrin Saki, MD
Department of Dermatology, Shahid Faghihi Hospital, Zand Avenue, Shiraz, Iran
Email: nasrinsa85@yahoo.com

Conflict of interest: none to declare

Received: 20 March 2014
Accepted: 18 June 2014

Cutaneous skin tags are common skin growths, usually harmless, which protrude from the skin and may have a short, narrow stalk. Typically, they are the same color as the skin or a little darker and appear mostly in the axilla, groin, and cervical area. In this report, we present a 30-year-old female with pedunculated and sessile papules in both of her ear canals with no history of any related illnesses and a negative family history. Histopathological examination of the papules showed intra-auricular skin tags. Most of the cases of skin tags near the ear canals are reported in patients with congenital disorders and malformations. Therefore, to the best of our knowledge, this is the first reported case of skin tags in both ear canals in an otherwise healthy adult.

Keywords: acrochordon, ear, eruptive lesions, skin tag

Iran J Dermatol 2014; 17: 107-109

INTRODUCTION

A skin tag or an acrochordon (plural acrochorda) or a fibroepithelial polyp is a common, acquired, small skin tumor that looks like a small piece of soft, hanging skin ¹. The incidence is equal in both males and females. Nearly 50% of all individuals have up to three skin tags mostly in the axillary and cervical areas ². Since skin tags are very often found in skin creases and folds such as the axilla, groin, and the skin under breasts, it is believed that skin tags occur as a result of skin rubbing up against skin; however, they may be scattered elsewhere. Skin tags can be single or multiple, with a variety in size and appearance; their size differs from 1-2 mm papules on the eyelids to 1-2 cm baggy polyps

on the trunk. Acrochorda are harmless and typically painless, and do not grow or change over time. Nonetheless, they can occasionally become painful, with an accompanying change in their color to a darker red-brown hue, if irritated or twisted ³. The frequency of skin tags increases with age ⁴. Studies have shown a genetic predisposition for the development of skin tags ³. Among the different disorders associated with skin tags, hyperlipidemia, hypertension, and obesity are the most common ⁵. Their treatment including scissor excision, electrodesiccation, or cryosurgery, is more of a cosmetic issue than a clinical concern ⁶. In this report, we present a case of eruptive skin tag localized in both ear canals, which is an uncommon location for developing multiple skin tags.

CASE REPORT

The patient was a 30-year-old female from Shiraz, southwest of Iran, who was referred to our dermatology clinic with a number of skin colored pedunculated and sessile papules in both of her ear canals. Her problem started 2 years prior to her referral when she developed few skin colored papules, mostly pedunculated, in both her ear canals that rapidly enlarged and increased in number (Figure 1). On her skin examination, there were multiple pedunculated and sessile skin-colored asymptomatic papules. There was no pain or tenderness on palpation and no erythema, and the patient did not notice any hyperhidrosis, associated with the growth. There was no overlying ulceration. She was an otherwise healthy housewife with no other significant cutaneous findings and no evidence of systemic disease, no history of trauma, infection or history of dermatologic disease in her family. Her drug history was insignificant. Excisional biopsy was done and one of the papules was sent for histopathological examination.

Microscopic examination of the hematoxylin-eosin stained sections showed a polypoid tissue with a fibrovascular core covered by a slightly hyperplastic epidermis. There was also a focal mild perivascular lymphocytic infiltration. No cytological atypia or koilocytic change was present, nor was there any mitotic activity (Figure 2). Fluorescent in situ hybridization (FISH) for HPVs 6, 11, 16, 18, 31, 33, 35, 45, 51, and 82 was negative.

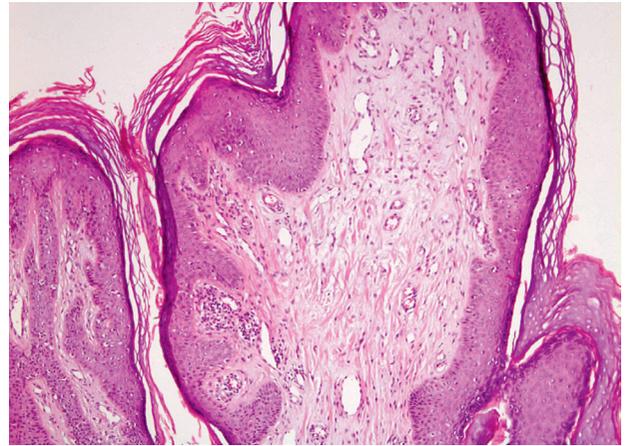


Figure 2. Fibrovascular tissue with loose collagen fibers and a focal mild lymphocytic infiltrate, hyperkeratosis and mild epidermal thickening overlying the fibrovascular tissue (H&E $\times 100$).

DISCUSSION

Previous published reports have revealed that the most abundant areas for skin tag development are the sides of the neck, axilla or groin, and occasionally on the thorax. Although several studies have reported a correlation between skin tags and diabetes indicating that hyperinsulinemia can cause endocrine shifts and alter cellular proliferation and growth⁷, there was no evidence of diabetes in our patient.

Although other types of abnormal masses interrupting the ear canal, such as cholesteatoma and hyperostosis, are more common^{8,9}, reports of skin tag formation in the ear canal are very rare. Most of the reports about skin tags near the



Figures 1. Pedunculated papules in both left and right ear canals

ear are about newborn babies with congenital abnormalities. For instance, Kelberman et al reported preauricular skin tags in hemifacial microsomia, which is a common birth defect¹⁰. Rosias et al reported preauricular skin tags and pits in a patient with cat eye syndrome¹¹. Rodríguez Asensio et al reported preauricular skin tags in a case suffering from Townes-Brocks syndrome¹². In this report, we presented a young woman with bilateral eruptive skin tags in the ear canals, which is an uncommon location for typical skin tags according to the literature. The patient was healthy with no associated factors such as a positive family history, hyperlipidemia, hypertension, or obesity.

Acknowledgments

The authors wish to thank the "Scientific writing" group of Student Research Committee of Shiraz University of Medical Sciences and Dr. Bahareh Kardeh for scientific editing of this paper.

REFERENCES

1. Rasi A, Soltani-Arabshahi R, Shahbazi N. Skin tag as a cutaneous marker for impaired carbohydrate metabolism: a case-control study. *Int J Dermatol* 2007;46:1155-9.
2. Sari R, Akman A, Alpsoy E, Balci MK. The metabolic profile in patients with skin tags. *Clin Exp Med* 2010;10:193-7.
3. Burns T, Brethnach S, Cox N, Griffiths C. *Rook's textbook of dermatology* 7th edition. Oxford: Blackwell Science 2004.
4. Banik R, Lubach D. Skin tags: localization and frequencies according to sex and age. *Dermatology* 1987;174:180-3.
5. Demir S, Demir Y. Acrochordon and impaired carbohydrate metabolism. *Acta Diabetol* 2002;39:57-9.
6. Hocutt JE Jr. Skin cryosurgery for the family physician. *Am Fam Physician* 1993;48:445-52, 455-6.
7. Jowkar F, Fallahi A, Namazi MR. Is there any relation between serum insulin and insulin-like growth factor-I in non-diabetic patients with skin tag? *J Eur Acad Dermatol Venereol* 2010;24:73-4.
8. Kojima H, Tanaka Y, Tanaka T, et al. Cell proliferation and apoptosis in human middle ear cholesteatoma. *Arch Otolaryngol Head Neck* 1998;124:261-4.
9. Zhao S, Han D, Wang D, et al. The formation of sinus in congenital stenosis of external auditory canal with cholesteatoma. *Acta Otolaryngol* 2008; 128: 866-70.
10. Kelberman D, Tyson J, Chandler DC, et al. Hemifacial microsomia: progress in understanding the genetic basis of a complex malformation syndrome. *Hum Genet* 2001;109:638-45.
11. Rosias PR, Sijstermans JM, Theunissen PM, et al. Phenotypic variability of the cat eye syndrome. Case report and review of the literature. *Genet Couns* 2001;12:273-82.
12. Rodríguez Asensio J, Rodríguez Rosell MV, Ramos Pérez A. Hearing loss in Townes-Brocks syndrome. *Acta Otorrinolaringol Esp* 2003;54:518-22.