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A 5-year-old Turkish girl presented for evaluation of 2 asymptomatic nodules on her left hand increasing in diameter over a period of 4 months. There was a suspicious history of trauma several weeks before the appearance of the lesions. She had a history of asthma, but no history of eczema. On physical examination certain palpable, visible, fresh-colored, painless, irregular surfaced and firm subcutaneous nodules of 1 x 1 to 1 x 2 cm in diameter with limited mobility were observed on the thenar eminence of the left hand and 2nd and 3rd phalanges of the 3rd finger (Figures 1 and 2).

Routine laboratory examination (complete blood count, erythrocyte sedimentation rate, biochemistry and chest radiography) including rheumatoid factor and antinuclear antibody tests showed no abnormality. A radiograph of the left hand demonstrated a soft tissue mass and was negative for bone anomalies. Ultrasonography and magnetic resonance images revealed poorly-defined soft tissue tumor in the subcutaneous fat along the palmar aspect of the left thenar area (Figures 3 and 4).

An incisional biopsy of the lesions was taken for evaluation. In histopathologic examination, there was a granulomatous inflammation with foci of necrobiosis in the deep dermis and subcutaneous tissue. There were typical palisading histiocytes and lymphocytes aro-



FIGURE 1: Nodular lesion on the thenar eminence of the left hand.



FIGURE 2: Similar nodular lesion was observed on the palmar side of the second and third phalanges of the third finger of the left hand.

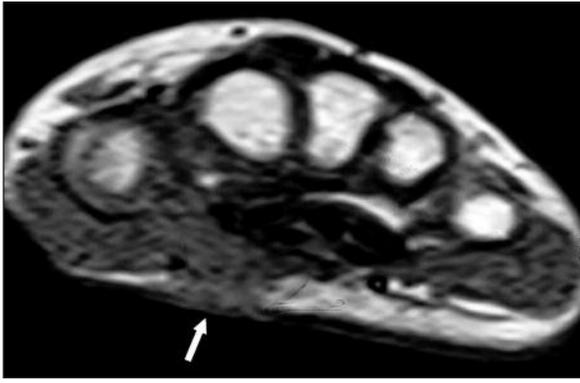


FIGURE 3: The lesion (arrow) has decreased signal intensity similar to that of skeletal muscle in T1-weighted images.

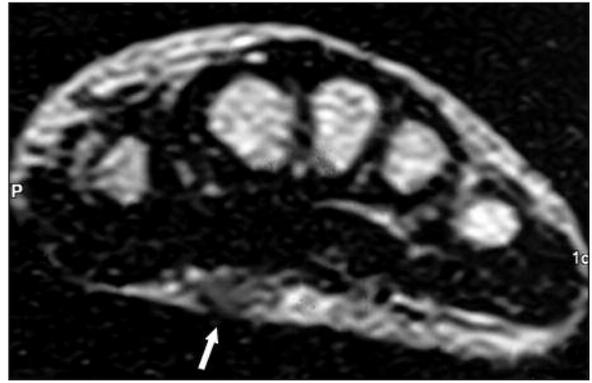


FIGURE 4: T2-weighted images demonstrated that the mass (arrow) had increased signal intensity.

und the area of necrobiosis (Figure 5). Stains with alcian blue for mucin were positive (Figure 6). No bacteria, leishmania, deep fungi or acid-fast bacilli were detected by microscopic and histopathologic examinations of skin biopsy specimens. PCR assays

and culture assays were not done for these etiological agents.

On the basis of given medical history, physical examination, laboratory data and histopathological findings what is your diagnosis?

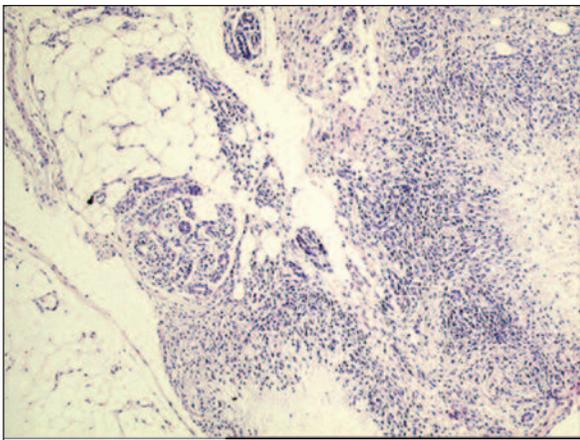


FIGURE 5: Palisading histiocytes and lymphocytes surrounding area of necrobiosis in the subcutaneous tissue (HE, x50).

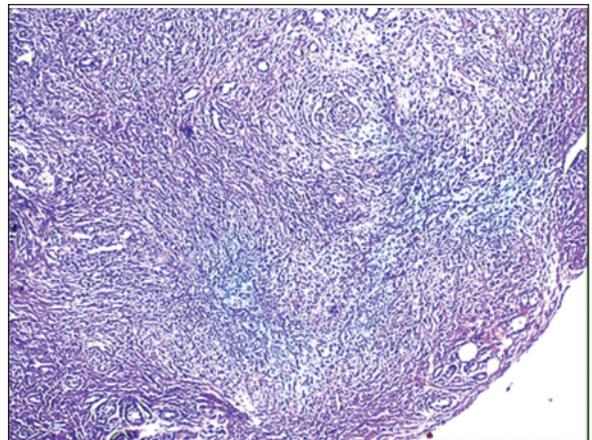


FIGURE 6: Alcian blue stain showing marked increase in connective tissue mucin (Periodic acid-Schiff-Alcian blue, x50).