A case report of Nodular Hidradenoma on palm

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Abstract

Nodular hidradenoma is uncommon benign tumor of the apocrine gland most commonly seen on head, neck, trunk and extremities. They are well circumscribed lesion. More commonly reported in females. These lesion are most frequently diagnosed clinically or on biopsy. Here we describe cytological findings of hidradenoma presenting as painless, mobile palmer swelling in a 35 year female covered by intact skin.

Key words
Aspiration cytology, Nodular hidradenoma,

Introduction

Benign tumor of apocrine origin are most commonly seen on Head and neck, trunk and extremities region. They are most commonly diagnosed clinically or on biopsy. Cytology shows bland polygonal cells. Significant mitotic activity and atypia is not identified. All acceptable example of this tumor have behaved in a benign fashion. Traditionally this tumor has been regarded as of sweat gland derivation.
Case History

A 35 year female presented with nodular swelling in left hand on palmer aspect with six months of history.

Covered by intact skin. Fine needle aspiration was done and cytology examination shows cellular aspirate with cells in clusters. Some cells are seen isolated. Cells are polygonal with moderate amount of basophilic cytoplasm with some cells showing eccentricity. The cells have fine evenly distributed nuclear chromatin and inconspicuous nucleoli with no evidence of mitosis.

Discussion

Nodular hidradenoma are uncommon benign epithelial neoplasm arising from eccrine sweat gland. They commonly arise in head, neck, trunk and proximal extremities. They are covered by intact skin or have ulcerative look. They may be solid/cystic/clear cell type. Cytology is helpful in diagnosing these tumor. As they have rare incidence of neoplastic transformation and metastasis, aspiration cytology proves to be rapid and less painful method of diagnosing the tumor before surgical resection. Complete surgical excision is the mode of treatment.
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