

Case Report

Giant epidermal cyst of the gluteal region

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ABSTRACT

Epidermal cysts are commonly called as sebaceous cysts. Giant epidermal cysts are generally greater than 5 cm. Giant epidermal cysts of the gluteal region are rare. Few cases of malignant transformation of the sebaceous cysts have been reported in literature. The aim of this paper is to report the occurrence of this rarity.

Keywords: Epidermal cysts, Giant, Gluteal region

INTRODUCTION

Epidermal cysts, also called as sebaceous cyst is a unilocular retention cyst containing keratin. It commonly occurs on the face, trunk, neck, scalp, scrotum, earlobe and breast and can vary in size from a few millimeters to less than a few centimeters. Giant epidermal cyst is defined when the size of the cyst exceeds 5 cm. Giant epidermal cysts are rare and have a propensity to develop malignancy.¹⁻⁴

CASE REPORT

We report a case of right gluteal swelling in a 65 year old male patient slowly growing over last 10 years.



Figure 1: Epidermal cyst with Punctum.



Figure 2: Surgical excision of the epidermal cyst.

There was no pain or discharge associated with the swelling. The swelling had gradually increased in size over past 10 years to attain the present size of 14 by 10 by 8 cm. Clinical examination of the swelling revealed a soft cystic painless swelling over the right gluteal region with a central black punctum (Figure 1). The diagnosis was confirmed by fine needle aspiration cytology. Excision of the swelling was done (Figure 2) with local flap mobilization and primary closure over a drain (Figure 3). Histopathology of the specimen revealed cyst with stratified squamous epithelium lining containing keratin. No malignant change was reported on histopathology.



Figure 3: Specimen of giant epidermal cyst.

DISCUSSION

Epidermal inclusion cysts occur as a result of migration of the epidermal cells into the dermis. They are lined with stratified squamous epithelium and contain keratin. Epidermal cysts are generally small; solitary present on the face; trunk; neck and scalp. The overlying skin almost always shows a punctum.

Giant epidermal cysts are rarely seen in surgical practice. A small cyst evolving into large one takes years, as the rate of growth is not more than 0.5 cm per year. They are more common in scalp, usually above a line drawn through upper part of ear lobule and occipital region. As it is asymptomatic, neglect on part of the patient for a long time in seeking medical advice leads to the formation of a giant cyst. Absence of hair on a large cyst over scalp differentiates it from a dermoid cyst. Punctum in a large sebaceous cyst is difficult to detect or absent, as more and more hair follicles overlying it getting stretched as the swelling enlarges, makes it difficult to be detected.

Giant epidermal cysts are rare clinical curiosities', more likely to develop into complications including malignancy. Treatment of a sebaceous cyst is its total excision along with capsule. We have presented a rarely encountered case of a giant epidermal cyst over the gluteal region where a total excision was performed, one of the few cases presented in literature till date.^{5,6}

There is risk of malignant transformation of the sebaceous cyst.^{7,8} Squamous cell carcinoma, Basal cell carcinoma, Mycosis fungoides and melanoma are the various types of malignancies reported in literature.^{9,10} Diagnosis is generally achieved by FNAC. MRI is an useful adjunct to establish the diagnosis in atypical locations. Simple excision is the treatment of choice in

uncomplicated cases; however in patients with large epidermal cysts and underlying medical disorders, regional perforator island flaps reconstruction has been performed.¹¹ The outcome of these flaps depends on the underlying disease and the premorbid conditions.

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