Case report

Atypical sebaceous cyst: uncommon and unusual locations

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ABSTRACT

Sebaceous cysts are common in day to day practice. But unusual locations with atypical presentations may pose problem in diagnosis as well as management. Here we have reported 4 cases of such atypicality which are very uncommon and unusual.

Keywords: Atypical, Sebaceous cyst

INTRODUCTION

Sebaceous cyst usually means a retention cyst caused by the occlusion of one or more ducts of sebaceous glands with the accumulation of the secretion.¹ It is quite common in daily surgical practice. Blocked sebaceous glands, swollen hair follicles, high levels of testosterone, use of androgenic anabolic steroids are all causative factors for such cysts.²,³ Though they may occur anywhere on the body (except the palms and soles) the scalp, ears, back, face, and upper arm, are common sites for sebaceous cysts.⁴ But it can presents with very unusual way in unusual locations. Here we have reported 4 such cases of very rare presentation.

CASE REPORT

Case 1

60 year old male presented with multiple swelling in scrotal skin for last 7 months. Since onset these gradually increased in size without any pain. On examination multiple subcutaneous lobular tense cystic nodular swelling of varying size noted involving whole of the scrotum along with left sided hydrocele (Figure 1). USG of scrotal area revealed multiple nodular swelling from subcutaneous tissue with left sided hydrocele. He was admitted in hospital and underwent excision of scrotal skin along with all swellings and reconstruction using skin from rest of scrotal sac. Excised nodules sent for histopathology examinations - revealed sebaceous cyst. He was followed up for 1 month and in good health now.

Figure 1: Multiple subcutaneous tense cystic sebaceous cyst.
**Case 2**

45 year old male presented with multiple swelling of scrotal region for last 6 years. These were small in size at onset which increased gradually without any pain. On examination multiple nodular hard swelling involving whole of the scrotum noted (Figure 2). USG revealed no underlying abnormality apart from multiple space occupying lesions involving scrotal skin. He was operated with excision of whole scrotal skin and reconstruction. Histopathology revealed calcified sebaceous cyst.

![Figure 2: Calcified sebaceous cyst involving whole of the scrotum.](image)

**Case 3**

67 year old male presented with swelling over right elbow for last 1 year. He had difficulty in flexing elbow along with pain over tip of elbow. On examination one cystic fluctuating nontender swelling measuring 6.5 cm in diameter noted along with sebaceous horn (Figure 3). Cyst was excised completely.

![Figure 3: Sebaceous horn over right elbow.](image)

**Case 4**

35 year old female presented with swelling over knuckle region of right hand for last 3 months. On examination a soft cystic swelling without any punctum noted (Figure 4). Provisional diagnosis of dermoid cyst done and excised. But histopathology revealed sebaceous cyst.

![Figure 4: Epidermal cyst over 1st web space.](image)

**DISCUSSION**

Sebaceous cyst also known as epidermal cyst basically a misnomer as it does not contain sebum. A sebaceous cyst is a small, dome-shaped cyst that develops in the skin, filled with thick grease like material and contains keratin. Sebaceous cysts are very common and are either found incidentally or present as a firm non-tender lump. If they rupture a local inflammatory response to the necrotic debris released can mimic infection. Although they can be found anywhere in the hair bearing area, they are typically located on the scalp, face, neck, trunk, and back. Cysts usually vary in size from few mm to 4 cm in diameter. They occur singly or in groups. Besides obstruction of the pilosebaceous gland, sebaceous cyst is also associated with pathological remnant and insertion of the epidermal material into the dermis. Sebaceous cyst is rarely present before adolescent based on the fact sebaceous cyst is slow growing which means that it is more common in adult and middle age patient.

Multiple sebaceous cyst of scrotum are not so common now a days and when it does, it presents with typical features of multiple cystic swelling soft to firm without any puncta. In case 1, we have reported multiple sebaceous cyst of scrotum which are subcutaneous in location and very atypical as can be seen from image. This type of sebaceous cyst has never been mentioned anywhere in medical literature so far.

Calcification of sebaceous cyst can occur over a long period of time (case 2). The treatment is usually removal of whole scrotum with reconstruction to cover bare testis (Figure 5).
Figure 5: Reconstruction after excision of all cysts.

Cutaneous horn in sebaceous cyst is very rare. Here in case 3, we have reported such case in very unusual location over right elbow. Cutaneous horn is atypical in the sense that it can be associated with malignancy (squamous cell carcinoma) rarely.7,8

Case 4 shows sebaceous cyst in a middle aged female in very atypical location (1st web space) and without any punctum. The etiology here may be trauma driving epithelial squamous into the dermis.

CONCLUSION

Sebaceous cyst can present with varied and atypical features. A detailed knowledge of various atypical presentation of sebaceous cyst should be kept in mind for proper diagnosis and treatment.

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