Original Article
Benign Fibrous Histiocytoma - A Rare Case Report

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Abstract
Background: Dermatofibroma or Benign fibrous histiocytoma is a benign skin growth. It is a common cutaneous nodule of unknown aetiology that occurs more often in women. Vrana Granthi is one of the Vrana Upadrava. Acharya Vagbhata has described about the Vrana Granthi which occurs due to Apathya Sevana, improper Bandhana, and trauma by a stone in a person with wound.

Objectives: To correlate histiocytoma and with Vrana Granthi.

Materials and Methods: The reported case was of a 20 years old female patient who presented in the Shalya Tantra OPD, with the complaints of growth with itching, burning sensation & swelling in the sternal part of chest since 6 months.

Observations and results: The lesion morphologically looked like Keloid. The condition was diagnosed as benign fibrous histiocytoma (Vrana Granthi) after Chedana Karma (Excision) of the lesion under local anaesthesia through histopathological study.

Conclusion: Histiocytoma is a rare case which morphologically similar to Keloid. Any surgical interventions may have chances of recurrence and hence condition should be ideally managed with medical treatment.

Keywords: Chedana Karma, Dermatofibroma, Histiocytoma, Keloid, Vrana Granthi.

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**Lab investigation:**

- **Hb**: 11.3gm%,
- **Tc**: 8960 cells/cubic mm,
- **Bleeding time**: 2min 30sec,
- **Clotting time**: 4min 30 sec,
- **Random blood sugar**: 109mg/dl,
- **HBsAG**: Non reactive,
- **HIV 1 & 2**: Non reactive,
- **ESR**: 40mm/Hour.

**Intervention:**

Chedana Karma (Excision) was performed on the lesion. Oral medications with antibiotics, analgesics were given for five days only as prophylaxis. The excised tissue was sent for histopathology.

**Post surgical HPE report revealed Benign fibrous histiocytoma.**

**Observations**

A brown lesion of approximate 1.2cm in length and 1.5 cm in breadth with mild tenderness and firm in consistency was found on the chest wall at substernum area. The mass was provisionally diagnosed as keloid. As patient wanted to remove the mass surgically, the procedure was performed after explaining the prognosis. After all pre-surgical preparation, infiltration of local anaesthesia 2% Xylocain was done and the complete lesion from the base along with healthy margins was excised and wound closed with four 2.0 silk sutures. The reason behind the Chedana Karma was only because the lesion provisionally diagnosed as keloid.
The closing of wound was as per the standard operating procedure with 2.0 silk sutures, which as can be appreciate in Fig. no. 2. The recurrence of lesion was noted after one and half months (Fig.no.3). The reason behind recurrence was may be because of the character of disease or not performing Agnikarma. The recurrent lesion was also having the features of itching, mild tenderness, burning sensation and on palpation was firm in consistency.

**Discussion**

The differential diagnosis includes keloid, hypertrophic scar and dermatofibrosarcoma protuberance. Provisionally the case was diagnosed as Keloid and it was decided to perform surgical excision. Post HPE it was noted that the case was of histiocytoma. Local recurrence was present after one and half month. As per authors view, this type of rare case can be misdiagnosed as keloid, due to similar features with keloid. So histopathological study must be done to confirm the diagnosis as benign histiocytoma before performing excision. It can be considered as *Vrana Granthi* and treated with *Raktasodhana Karmas* because most of the symptoms are due to vitiation of *Rakta Dhatu*. These procedures will help in Shamana of *Rakta Dhatu* and thereby reduce the symptoms. Although *Agnikarma* is mentioned in *Vrana Granthi* but it was not performed here because of the initial diagnosis of the case as keloid. The other intention was to seek the healing of wound with primary intention which otherwise may be disturbed by *Agnikarma*. After *Agnikarma*, the wound have to be left to heal by secondary intention which may leave a larger scar and look cosmetically poor to avoid this condition *Agnikarma* was not performed in this case.

**Conclusion**

Benign fibrous histiocytoma is a rare benign growth that can manifest anywhere in the body, and in this case it manifested in sternal part of chest wall. In Ayurveda, it can be correlated with *Vrana Granthi*. A careful histological examination is necessary for diagnosis, as these pathology have a wide range of presentation. Complete resection is advised, with careful evaluation of surgical margins. However, small histiocytoma may be approached with conservative treatment using *Rakta Shodhana* drugs. Because most of the symptoms like burning sensation (*Daha*) and itching (*Kandu*) are due to vitiated *Rakta Dhatu* hence excision was performed and healing with primary intention was sought. However there was reoccurrence of the condition.
References

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