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SUBCUTANEOUS MYXOMA MASQUERADING AS CHONDROID SYRINGOMA: A CASE REPORT

Pathology

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ABSTRACT

INTRODUCTION- Subcutaneous myxomas are rare entities encountered in routine pathology practice. The cytological features of this entity are not well known. We present a case of subcutaneous myxoma diagnosed as chondroid syringoma on FNAC. **CASE REPORT-** Forty five years male presented with nodular swelling on posterior aspect of right leg, since 10 years. Fine needle aspiration smears showed chondromyxoid stroma and round to oval shaped plasmacytoid cells embedded in stroma. Thus the diagnosis of chondroid syringoma was suggested on cytology; subsequently histopathology showed subcutaneous myxoma. **CONCLUSION-** Although both are benign condition, the distinction in these two conditions is very difficult on cytology although differentiation is only of academic interest.**SUMMARY-** Cytological picture of myxoma and chondroid syringoma are similar that includes presence of chondromyxoid stroma and round to oval shaped myoepithelial cells.

KEYWORDS

Myxoma, Chondroid syringoma, Stroma, Myoepithelial cells

INTRODUCTION- Cutaneous nodules are a diagnostic challenge due to their varied morphology. FNAC plays an important role in the diagnosis of these lesions. However, the FNA findings may sometimes be misleading thereby causing diagnostic confusion. We here discuss one such case.

CASE REPORT- 45 year male presented with nodular swelling of size 3x2 cm on posterior aspect of right leg since 10 years. FNA smears showed chondromyxoid stroma and round to oval cells embedded with in it. The lesion was excised and sent for histopathological examination . Section showed skin covered tissue showing,a well circumscribed hypocellular myxoid tumor(Fig 2a). Numerous spindle to stellate cells seen(Fig 2b). Histopathological findings were consistent with subcutaneous myxoma.

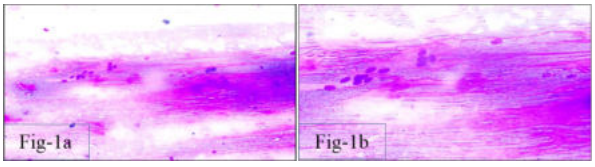

Fig 1a,1b-FNA smears shows chondromyxoid stroma and myoepithelial cells.

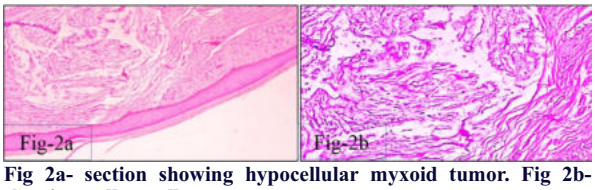

Fig 2a- section showing hypocellular myxoid tumor. Fig 2b- showing stellate cells.

DISCUSSION- Cutaneous nodules are a common clinical presentation. These lesion may be confusing in cases which shows few cells against a background of chondromyxoid stroma. The present case highlights these facts as on FNAC it was diagnosed as chondroid syringoma and histopathological examination showed subcutaneous myxoma. Thus in these cases myxoma should be kept in the differential diagnosis.

CONCLUSION- The distinction between chondroid syringoma and subcutaneous myxoma is difficult on cytology. Histopathological examination is gold standard. Thus this case is presented here to make the audience aware of these cytological dilemma.

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