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Case Report

Anal Hidradenoma Papilliferum in a Male Patient: A Case Report

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Abstract

A rare benign tumor of the perianal region which needs to be differentiated from other perianal diseases is Hidradenoma papilliferum or papillary hidradenoma. It originates from the apocrine glands or anogenital mammary glands [1,2]. Hence, hidradenoma papilliferum is a pathologic finding, with anal hidradenoma papilliferum being its rarest form. Diagnosis is rarely made clinically and is almost exclusively done by histopathology. Herein, we present a case of 42 year old male patient presenting with painful anal lump which was excised and histopathologic examination showing anal hidradenoma papilliferum. To the best of our knowledge, this is the third case to be reported in the English medical literature for anal papillary hidradenoma in male patient.

Keywords: Male Patient; Anal; Hidradenoma; Papilliferum

Introduction

Hidradenoma papilliferum or papillary hidradenoma is a rare benign tumor originating from the apocrine glands or anogenital mammary glands [1,2]. Reported for the first time in 1944 by Cooper and Mac Donald [3], and since then, less than 20 cases have been published in the English medical literature. The etiology of papillary hidradenoma is uncertain, involving the anogenital region, in particular the vulva including labia majora, labia minora, inter labial folds and clitoris. To a rarer extent, the perianal region might be involved. Occurring almost solely in the female anogenital area, however, hidradenoma papilliferum in male patients have been reported twice in the English medical literature [4,5]. It typically occurs in middle-aged women [1,6], usually as an asymptomatic slowly growing solitary nodule with a size ranging between 0.5 cm and 2 cm [6,7]. On the other hand, papillary hidradenoma may present with overlapping symptoms of other perianal pathologies, these symptoms include bleeding, pain, pruritus, and ulceration. Hence it is important to differentiate it from the more commonly benign perianal pathologies including symptomatic hemorrhoids, perianal abscesses, viral verrucous lesions, perianal sebaceous cysts, and malignant lesions, such as metastatic papillary carcinoma, and squamous cell carcinoma.

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42 year old male patient with no past medical history presenting with a painful anal lump increasing in size over the course of 6 month duration. Patient denied any anal secretion or blood per rectum. On examination at 3 o'clock over the left lateral hemorrhoidal pack a well demarcated around 1 cm beige nodule was noted.

Consequently, the patient was scheduled for excision. Final histopathologic examination confirmed the diagnosis of hidradenoma papilliferum.

Discussion

Hidradenoma papilliferum is a rare pathologic finding, with anal hidradenoma papilliferum being even rarer. Even rarer, is anal hidradenoma papilliferum in a male patient. To the best of our knowledge, 2 male cases has been previously reported in the medical English literature and herein we present the third case of anal hidradenoma papilliferum in a male patient. Hidradenoma papilliferum has a wide spectrum of presentations ranging from a slowly growing, asymptomatic solitary nodule [6,7] till per rectal bleeding, painful swellinmg on the anus, pruritus ani, and ulceration. Its etiology is yet to be determined, occurring almost exclusively in

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the anogenital area of female patients, although 2 previous reports have described hidradenoma papilliferum in male patients [4,5]. It has been previously believed to originate from the apocrine glands in the anogenital region, however, recently the anogenital mammary-like glands has been investigated as a potential source [8]. In fact, mammary-like glands have been documented as the origin of hidradenoma papilliferum in several non anogenital areas such as the ears, face, chest, and scalp [9]. Diagnosis is merely made by histopathologic examination. Hidradenoma papilliferum are benign lesions and are cured by surgical resection [10]. The gold standard for treatment of hidradenoma papilliferum is local excision, with a good overall prognosis. Recurrence is an unusual event and is attributed to incomplete excision of the primary tumor [7]. Add to this, malignant transformation is a rare event, however it has been reported in few cases [11] with some authors stating that this malignant transformation is considered a histologic misinterpretation [12]. Our case highlights the importance of deploying a wide differential diagnosis when dealing with perianal mass, furthermore, it sheds the importance of histologic examination in all resected specimens.

Conclusion

Anal hidradenoma papilliferum is the rarest form of Hidradenoma papilliferum or papillary hidradenoma. It should be included in the differential diagnosis of proctologic complaints. Diagnosis is solely made by histologic examination, and its treatment is complete local excision.

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