

Multiple Giant Trichilemmal Cysts of the Head: Case Report

Funda Tamer,¹ MD, Mehmet Eren Yüksel,² MD

Address: ¹Malazgirt State Hospital, Department of Dermatology, Muş, ²Devrek State Hospital, Department of General Surgery, Zonguldak, Turkey

E-mail: doctormehmeteren@yahoo.com

* Corresponding Author: Dr. Mehmet Eren Yüksel, Devrek State Hospital, Department of General Surgery, Devrek, Zonguldak, Turkey.

Published:

J Turk Acad Dermatol 2015; 9 (3): 1593c6

This article is available from: <http://www.jtad.org/2015/3/jtad1593c6.pdf>

Keywords: Trichilemmal, cyst, multiple, pilar, scalp

Abstract

Observation: Trichilemmal cysts are common tumors of the scalp arising from hair follicles. Trichilemmal cysts may vary in number and size, however multiple giant trichilemmal cysts of the scalp are rarely seen. Hereby, we report a 48-year-old Caucasian female with multiple giant trichilemmal cysts on the scalp. The patient complaining of swellings on the head, headache and pruritus stated that the lesions on her head had been gradually growing over the past ten years. Four cystic tumoral lesions of the scalp have been surgically removed. The histopathological evaluation of the specimen revealed trichilemmal cysts. The patient did well postoperatively. Bearing in the mind that the number and size of trichilemmal cysts may vary, they should always be taken into account in the differential diagnosis of cystic lesions of the scalp.

Introduction

Trichilemmal cysts, also known as pilar cysts, arise from hair follicles [1]. Trichilemmal cysts are common tumors of the scalp. Beside the scalp region, trichilemmal cysts may also occur in hair bearing areas such as neck, trunk and gluteal region [2]. Trichilemmal cysts are mostly seen in middle aged women as multiple lesions [3]. Although trichilemmal cysts may appear sporadically, they may also run in families in autosomal dominant inheritance pattern [4]. Despite the fact that trichilemmal cysts may vary in number and size, multiple giant trichilemmal cysts of the scalp are rarely seen.

Case Report

A 48-year-old Caucasian female complaining of swellings on the head, headache and pruritus stated that the nodular lesions on her head had been slowly growing over a period of ten years. There was no history of trauma or infection. Laboratory tests revealed no abnormalities. Past medical his-

tory and family history were both unremarkable. Four cystic lesions : one cystic lesion 2x1.5x1 cm in frontal region, one cytic lesion 3x2x1.5 cm in right temporal region, one cystic lesion 5x3x2.5 cm on the cranial vertex and one cytic lesion 5x4.5x3 cm in occipital region were surgically removed under local anesthesia (Figures 1a, b, 2, 3, 4a, b and 5). The mobile nodular cystic lesions were elastic and encapsulated with a yellow-white-brownish colour. The histopathological evaluation of the specimen revealed trichilemmal cysts. After



Figure 1 (a b). Shows four cystic lesions on the scalp of a 48 year-old woman



Figure 2. Hair removal preoperatively



Figure 3. Skin incision reveals the encapsulated cystic lesion



Figure 4 (a b). The trichilemmal cyst removed intact from the occipital region is 5x4.5x3 cm in size



Figure 5. Inner structure of keratin containing trichilemmal cyst

the wound closure, the patient was discharged home the same day without any complication.

Discussion

Trichilemmal cysts are common lesions of the scalp. However, multiple giant trichilemmal cysts of the scalp are rarely seen. Trichilemmal cysts may grow slowly in time and reach a size of 11x10 cm [5]. Trichilemmal cysts often appear as painless nodular lesions on the scalp. However, case reports with painful trichilemmal cysts have also been published [6]. Surgical removal is the definitive treatment of trichilemmal cysts of the scalp. In order to decrease the likelihood of cyst recurrence, trichilemmal cysts should be removed meticulously with their capsules, without tearing the cyst wall apart.

Bearing in the mind that cystic lesions of the scalp are often seen, it is not surprising that the definite diagnosis of cystic lesions of the scalp are only reached after histopathological examination of the specimen. Trichilemmal cysts are often benign, however malignant transformation has also been described [7, 8]. Therefore, trichilemmal cysts of the scalp should be meticulously excised and a careful

pathological examination of the specimen should be performed in order to rule out malignancy.

References

1. Abreu Velez AM, Brown VM, Howard MS. An inflamed trichilemmal (pillar) cyst: Not so simple? *N Am J Med Sci* 2011; 3: 431-434. PMID: 22362454
2. Leung LK. Differential diagnosis of soft scalp lumps. *BMJ Case Rep* 2011. pii: bcr0720114492. PMID: 22674591
3. Wolff K, Johnson RA. Fitzpatrick's Color Atlas & Synopsis of Clinical Dermatology. Part 1: Disorders Presenting in the Skin and Mucous Membranes. Trichilemmal Cyst. 6th Edition. McGraw Hill-Medical, 2009. p. 212.
4. Ikizoglu G1, Kaya TI, Tursen U, Baz K. The use of the freer dissector for the removal of trichilemmal cysts. *Int J Dermatol* 2003; 42: 405-407. PMID: 12755985
5. Pérez Lara FJ, Ferrer Berges A, Hernández Carmona J, Oliva Muñoz H. Giant trichilemmal cysts of the scalp. *Cir Esp* 2013; 91: 121. PMID: 23219203
6. Kavak A, Aydogan I, Alper M. Shall we add trichilemmal cyst to painful skin tumours? *J Eur Acad Dermatol Venereol* 2006; 20: 238. PMID: 16441653
7. Waibel M, Blume U, Anhuth D, Almond-Roesler B, Orfanos CE. Tumors of the pilosebaceous unit. *Skin Pharmacol* 1994; 7: 90-93. PMID: 8003331
8. Chowdhury A, Salam KS, Sultana T, Amin AS A, Datta PG. Multiple giant pilar cysts of scalp: A case report. *Bangladesh J Otorhinolaryngol* 2010; 16: 131-132.