NAEVUS SEBACEOUS OF JADASSOHN - AN INTERESTING CASE REPORT

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Abstract

Naevus sebaceous of Jadassohn is a hamartoma found in the head and neck region. It remains inconspicuous but shows a spurt of growth after puberty. The importance of this lesion remains in its malignant potential though it remains asymptomatic.

Key words: Naevus sebaceous of Jadassohn, malignant potential.

Introduction:

Naevus sebaceous of Jadassohn first described in the year 1895 by Jadassohn, as an exotic curiosity has now become not an uncommon lesion worldwide. It gains importance because, though it is a hamartoma, now it has been proved to have a malignant potential.

Case history:

A 20 year old male presented with a small swelling in the left temporo occipital region of scalp measuring about 1x1 cm. The swelling was noticed for the past 7 years with mild increase in its size. Local excision was done in the department of surgery.
Naevus sebaceous of Jadassohn is a benign hamartomatous lesion\[^1\]. It is otherwise called as organoid nevus. It is composed of large sebaceous glands, heterotopic apocrine glands, defective immature hair follicles, acanthosis and papillomatosis of epidermis. Though it is a congenital lesion, it appears to increase in size after puberty. The common site of occurrence is head & neck region mainly scalp and face\[^2\]. If left untreated this can be a nidus for a variety of benign and malignant tumours\[^3\]. Benign adnexal tumours like Trichoblastoma, Syringocystadenoma Papilliferum, Trichilemmoma, Nodular Hidradenoma, Hidrocystoma and Eccrine Poroma can arise from nevus sebaceous\[^4\]. Malignant tumours are less commonly seen and include Basal cell carcinoma with an incidence as high as 10\%, to a lesser extent, Squamous cell carcinoma, Trichilemmal carcinoma, Sebaceous carcinoma, Poro carcinoma And Apocrine carcinoma\[^5\],\[^6\]. So this lesion should be excised completely with a close clinical surveillance for any recurrence or new growths.

**Discussion:**


B

(1B). The cut surface showing smooth, homogenous yellow areas.

**Gross features:**

A greasy yellow elevated lesion 1x1 cm devoid of hairs with the cut surface showing smooth, homogenous yellow areas [fig 1A&1B].

**Microscopy:**

Sections studied showed stratified squamous epithelium with papillomatous hyperplasia and mild acanthosis of the epidermis with the dermis showing nests of melanocytes [fig 2A&2B], hyperplasia of sebaceous glands and immature hair follicles [fig 3A&3B]. The features were diagnostic of Naevus sebaceous of Jadassohn.

![Image](image1)

Figure 2: H&E (100x): (2A) - shows stratified squamous epithelium with papillomatous hyperplasia and mild acanthosis of the epidermis: (2B) - The dermis shows nests of melanocytes.

![Image](image2)

Figure 3: H&E (100x): (3A) - shows hyperplasia of sebaceous glands. (3B) - Shows defective immature hair follicles.

**Conclusion:**
This case is presented to create an awareness regarding the premalignant potential of Naevus sebaceous of Jadassohn as it is not so uncommon in our country.

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REFERENCES:


