

## Eccrine Angiomatous Hamartoma of the Sacral Region

Sir,

Eccrine angiomatous hamartoma (EAH) is a rare tumor characterized histologically by an intradermal proliferation of eccrine sweat glands associated with vascular channels. Most EAHs are presented at birth and typically appear as a single angiomatous nodule or plaque on the extremities. In this report, we describe a peculiar type of EAH, which was located on the sacral region and presented as a chronic ulcer clinically.

### CASE REPORT

A 49-year-old woman visited our hospital complaining of a reddish plaque of 16 years' duration on her sacral region. Physical examination showed an area of reddish, slightly elevated, indurated plaque, 50 × 25 mm, on the sacral region. The central area was a crusted ulcer 20 × 15 mm (Fig. 1). The lesion was slightly painful on applying pressure. The entire lesion was excised and sectioned serially for histological diagnosis.

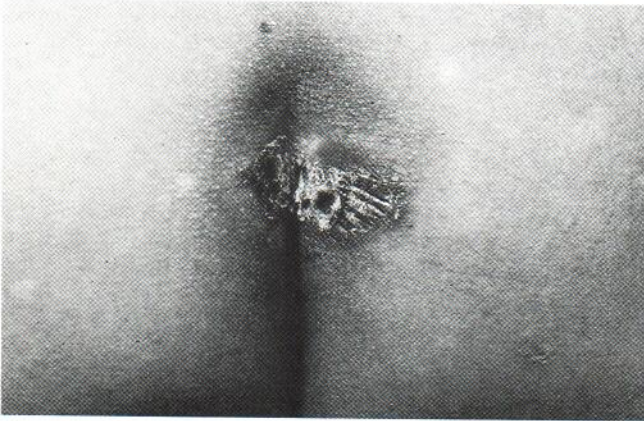


Fig. 1. Clinical aspect of the lesion on the sacral region.

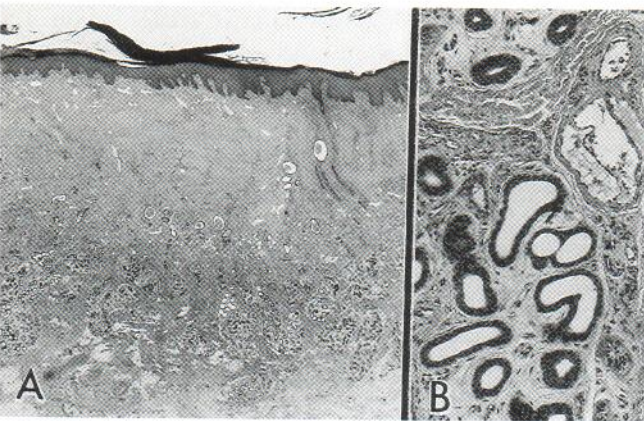


Fig. 2. A: Low-power photomicrograph showing an increased number of eccrine structures in the lower dermis. B: The two main components of the tumor: variously sized, distended eccrine structures and dilated blood vessels.

The epidermis showed irregular acanthosis. There were lobular aggregates of mature eccrine glands at the interface between the deep parts of the dermis and the subcutaneous tissue. The secretory portion of the eccrine apparatus and the proximal portion of the ducts were surrounded by myxoid connective tissue. The sweat gland acini were well-differentiated and some eccrine ducts were dilated. Neither mitotic figures nor atypias were observed. The vascular cavities were intimately related with the sweat glands, and the capillary spaces were irregular and lined by a single layer of endothelial cells (Fig. 2A, B).

### DISCUSSION

Since the presenting complaint was the indurated, reddish plaque with crust on the sacral region, the initial differential diagnosis included several kinds of skin diseases such as pilonidal sinus, deep mycosis and mycobacterial infection. Histologically, however, the lesion showed a marked increase in the number of mature eccrine glands combined with vascular channels, and therefore the plaque was diagnosed as EAH.

Regarding location, EAH is most frequently found on the limbs (1) and occasionally on the trunk (2). To our knowledge, however, there are no published reports of EAH on the sacral region. The sacral area is a common region for a variety of congenital skin abnormalities, which are usually associated with congenital spinal dysraphism, including dermal dimple or sinus, lipoma, a tuft of long, soft silky hair, pigment macule, port-wine stain, skin tag, dermoid cyst or angiomatous nevus (3). Therefore the presence of EAH on the sacral region can be easily imagined. A matter for regret, we did not investigate X-ray of the spine. A diagnosis of EAH should be considered in the rare clinical situation of reddish plaque on the sacral area.

Differential diagnoses to consider are ependymoma (4) and digital eccrine angiomatous hamartoma (5).

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Received April 8, 1994.

Hidetoshi Nakayama, Motoyuki Mihara, Kyoko Hattori, Erika Mishima and Shuhei Shimao, Department of Dermatology, Faculty of Medicine, Tottori University, Yonago, 683 Japan.