Actinic keratosis presenting as a cutaneous horn

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Introduction

- A cutaneous horn is a hyperkeratotic projection from the skin that resembles an animal horn. It is referred to as “cornu cutaneum” in Latin.
- Cutaneous horn may arise from a wide spectrum of skin lesions, which may be benign, premalignant or malignant. A retrospective study of 643 cases of cutaneous horn by Yu et al in 1991, revealed 38.9% were derived from malignant or premalignant epidermal lesions, and 61.1% from benign lesions.
- It usually occurs on areas that are exposed to sunlight, which includes upper part of face, scalp, nose, lips, ear, eye lids, Forearm, leg, and back of hands may also be involved.
- The final diagnosis is usually confirmed via histopathological examination of the specimen. Wide excision with careful histological examination is the treatment of choice.

Case Presentation

- A 55-year-old Indian male with no known medical illnesses presented with a complaint of a slow progressing growth on his left ear pinna, which was occasionally painful and itchy but without any episodes of bleeding or discharges.
- The lesion had appeared one year prior and it occurred spontaneously, unrelated to any event of trauma or insect bites. Results of systemic and general examination were normal.
- Examination of the left ear revealed a blackish hard curved mass, hard in consistency, arising from the antihelix of the left ear pinna measuring 5 cm in length and 2 cm in width at its base (Figures 1, 2). Findings of otoscopic examination were normal and there was no regional lymphadenopathy noted.
- The lesion was diagnosed clinically as a cutaneous horn and patient underwent wide local excision of the mass under local anesthesia. Histologically, the specimen was reported as a 5.0 cm x 2.0 cm x 1.0 cm mass with markedly thickened parakeratosis and hyperkeratosis, suggesting an excised cutaneous horn with actinic keratosis at the base with no associated malignant changes. The wound healed well and there was no reoccurrence of the mass after two months of follow-up.

Conclusion

- Recent large study of cutaneous horns conducted by Mentese et al. reported 41.44 % of the lesions as benign and 58.56 % as premalignant or malignant. Sun exposure is an important etiological factor in pathogenesis of the cornu cutaneum.
- The underlying pathology at the base of the lesion is usually more important than the overlying horn. Therefore, surgical excision remains the standard of treatment.
- A cutaneous horn is a rare slow-growing tumor, with a bizarre horn-like growth commonly appearing at sun-exposed area of the head and neck region. However, the lesions can also originate from a benign, premalignant, or malignant condition; therefore, excision with histopathological studies of the base is mandatory in all cases.