UNUSUAL LESIONS OF PINNA

DR. MEERA KHADILKAR1, DR. DEVIPRASAD D.2, DR.U.A.KINI3, DR.M.R.P.KAMATH2, DR.SUJA S.1, DR.V.SHENOY1

1. DEPARTMENT OF ENT & HNS, KASTURBA MEDICAL COLLEGE, MANGALORE, MANIPAL ACADEMY OF HIGHER EDUCATION, INDIA
2. DEPARTMENT OF SURGERY, KASTURBA MEDICAL COLLEGE, MANGALORE, MANIPAL ACADEMY OF HIGHER EDUCATION, INDIA

**Information/ Background**

Most of the lesions affecting pinna are cutaneous conditions. Those arising from the cartilage are extremely rare, whereas those from the soft tissue like vascular, stromal and adnexal components are relatively common. This study aimed at analyzing the incidence, types and categories of unusual lesions affecting the pinna.

**Materials and Methods**

A retrospective analysis of medical records was conducted in 40 patients who underwent surgical excision for unusual lesions of the pinna in our hospitals from 2006 to 2018. Variables like age, gender and final diagnosis were noted. Common conditions affecting like perichondritis, seroma and keloid were excluded.

**Results**

- Mean age was 43.4 years.
- There were 30 males and 10 females.
- Epidermal cyst was the commonest lesion seen in 10 patients, followed by seborrheic keratosis in 7 patients and squamous cell carcinoma in 4 patients.

**Conclusion**

A wide spectrum of entities affecting the pinna were encountered in this study ranging from infectious, inflammatory to benign and malignant lesions. Early detection and a proper diagnosis after histopathological examination helps not only in successful management but also in preventing disfigurement and psychosocial complications.

---

**Table showing age and gender distribution of pinna lesions**

| AGE (in years) and gender | F | M | F | M | F | M | F | M | F | M | F |
|--------------------------|---|---|---|---|---|---|---|---|---|---|---|---|
| ≤10                      |   |   |   |   |   |   |   |   |   |   |   |   |
| 11-20                    |   |   |   |   |   |   |   |   |   |   |   |   |
| 21-30                    |   |   |   |   |   |   |   |   |   |   |   |   |
| 31-40                    |   |   |   |   |   |   |   |   |   |   |   |   |
| 41-50                    |   |   |   |   |   |   |   |   |   |   |   |   |
| 51-60                    |   |   |   |   |   |   |   |   |   |   |   |   |
| 61-70                    |   |   |   |   |   |   |   |   |   |   |   |   |
| >70                      |   |   |   |   |   |   |   |   |   |   |   |   |

**Infection/ Inflammation**

- Cutaneous histoplasmosis: 1

**Benign Adnexal Lesions**

- Epidermal cyst: 1  2  3  2  2
- Dermoid cyst: 1
- Seborrhoeic keratosis: 1  1  1  2  1  1
- Sebaceous hyperplasia: 1
- Pilomatrixoma: 1
- Pilar cyst: 1
- Eccrine hidrocystoma: 1
- Keratoacanthoma: 1
- Common wart: 1
- Trichoadenoma: 1
- Linear epidermal naevus: 1

**Benign Soft Tissue Tumors**

- Capillary hemangioma: 1  1
- Pyogenic granuloma: 1
- Arteriovenous malformation: 1
- Extranasopharyngeal angiofibroma: 1
- Epithelioid fibrous histiocytic dermofibroma: 1
- Cutaneous aneurysmal fibrous histiocytoma: 1

**Malignant Tumors**

- Squamous cell carcinoma: 1  1  1  1

**Total**

| 3 | 2 | 3 | 1 | 3 | 0 | 4 | 0 | 4 | 2 | 6 | 2 | 6 | 2 | 1 | 1 |

---

1. **Clinical photograph of epidermal cyst on left pinna**
2. **Clinical photograph of seborrhoeic keratosis of right pinna**
3. **Hematoxylin & Eosin (H&E) section [100x] - Subepidermal lesion composed of irregular anastomosing blood-filled spaces lined by sebaceous**