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## Eyelid Sebaceoma

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**Purpose:** We report a rare case of right upper lid sebaceoma. Sebaceoma is benign sebaceous tumour, well characterised in dermatology literature<sup>1</sup>. Sebaceous tumours include hyperplasia, adenoma, sebaceoma and carcinoma<sup>2</sup>. They rarely present as an adnexal lesion and carry significant systemic implications as they can be associated with Murr-Torre syndrome (MTS). This can involve colorectal, genitourinary malignancies and other subcutaneous neoplasms<sup>1,3</sup>. Therefore, it is an important differential to bear in mind.

**Histology:** Histology report confirmed sebaceoma. The overall appearance of the tumour was symmetrical with multiple variably sized nodules composed of a mixture of mature sebocytes and basaloid cells. Duct formation containing keratinous debris was obvious. The surface epithelium has a hint of a warty appearance. no mitotic activity was obvious. The lesion was tested for mismatch repair genes (such as MSH2 or MLH1), which were all normal, which means the likelihood for MTS to be low.<sup>2</sup>

**Case report:** An 88-year-old female was referred with a painless, slow growing right upper eye lesion. The patient was unsure over how this had developed. Previous history included multiple basal cell carcinomas (BCCs) on the temple and nose and a clear cell acanthoma on the calf, all of which were removed. Other past medical history included hyperthyroidism (thyroidectomy) and hypertension. No relevant family history was identified. On visualisation of the lesion appears to have typical characteristics of a seborrheic keratosis but based on strong previous history of BCCs, the lesion was excised with 2mm margins for biopsy, under local anaesthesia.

**Conclusions:** Sebaceoma can easily be missed as they can resemble seborrheic keratosis or chalazion<sup>4</sup>. Concurrent skin and internal malignancy associated with sebaceous adenomas have been previously discussed<sup>3</sup>. No concurrent skin or internal malignancy has been distinctly recorded with ocular sebaceoms previously. We present the first characterised case of ocular sebaceoma associated other multiple skin lesions. Based on this the patient will remain under surveillance to for internal malignancy and considered for further genetic testing.

## Recent Publications

1. Eisen DB, Michael DJ. Sebaceous lesions and their associated syndromes: Part I. J Am Acad Dermatol. 2009;61(4):549-560. doi:10.1016/j.jaad.2009.04.058.
2. Lazar AJF, Lyle S, Calonje E. Sebaceous neoplasia and Torre-Muir syndrome. Curr diagnostic Pathol. 2007;13(4):301-319. doi:10.1016/j.cdip.2007.05.001.
3. Jakobiec FA, Zimmerman LE, La Piana F, Hornblass A, Breffeilh RA, Lackey JK. Unusual eyelid tumors with sebaceous differentiation in the Muir-Torre syndrome. Rapid clinical regrowth and frank squamous transformation after biopsy. Ophthalmology. 1988;95(11):1543-1548. <http://www.ncbi.nlm.nih.gov/pubmed/3211463>. Accessed August 29, 2018.
4. Lee HJ, Min SK, Lee MJ. A Case of Eyelid Sebaceoma Mimicking Chalazion. J Korean Ophthalmol Soc. 2016;57(8):1303. doi:10.3341/jkos.2016.57.8.1303.

## Biography

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