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Case Report

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PREAURICULAR ACCESSARY TRAGUS: IS THIS A ORDINARY SKIN TAG?

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ABSTRACT

Accessary tragus usually occur as a small elevation of skin anterior to the tragus of the external ear. It is a rare congenital condition that may be confused with a skin tag, which was described first time by Birkett in 1858. Histologic feature include prominent stratum corneum layer with presence of eccrine glands with presence of cartilaginous core. We report a case of accessary tragus, presented as painless nodular growth since birth at left preauricular area, of a 11 year old boy.

INTRODUCTION

Accessory tragus (AT) is a congenital anomaly that typically presents at birth as an asymptomatic, solitary, skin colored, sessile or pedunculated, soft to firm papule or nodule located in the preauricular area. The condition was first described in 1858 by Birkett.[1] The terms preauricular skin tag, accessory auricle, rudimentary auricle, polyotia, and supernumerary pinna are misnomers. In the majority of cases, an AT is an isolated findings but at times may be associated with anomalies of the first branchial arch.[2,3]

CASE REPORT

A 11 year old boy presented with an asymptomatic, nodular growth since birth, slowly increased in size with the growth of the child. Developmental milestone were normal. Physical examination revealed 2 x 2 cm, solitary, firm, pedunculated, non-tender nodule in the left preauricular area. Nodule was excised with the clinical differential diagnoses of fibroepithelial polyp, epidermoid cyst and was sent for histopathological examination. Grossly, skin covered, 2x1.8cm polypoidal nodule was received with attached stalk. Cut section was solid, grayish white and homogenous. Histologic examination of the excised specimen showed overlying mild orthokeratotic epidermis with numerous hair follicles and sebaceous glands, prominent connective tissue, abundant fat lobules, and a central core of cartilage surrounded by adipocytes. (Figure 1& 2) Based on the histopathologic findings, the diagnosis of Accessary tragus was made and follow up was advised to rule out other congenital anomalies associated with AT.

Figure legend

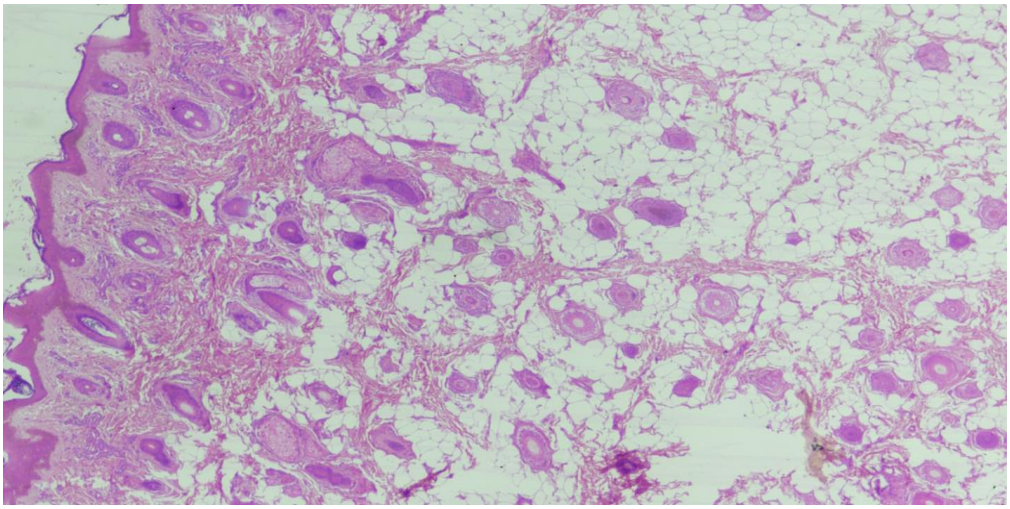

Figure 1: Microphotograph show multiple tiny hair follicles, sebaceous glands and adipose tissue in the dermis. (H & E; 100X).

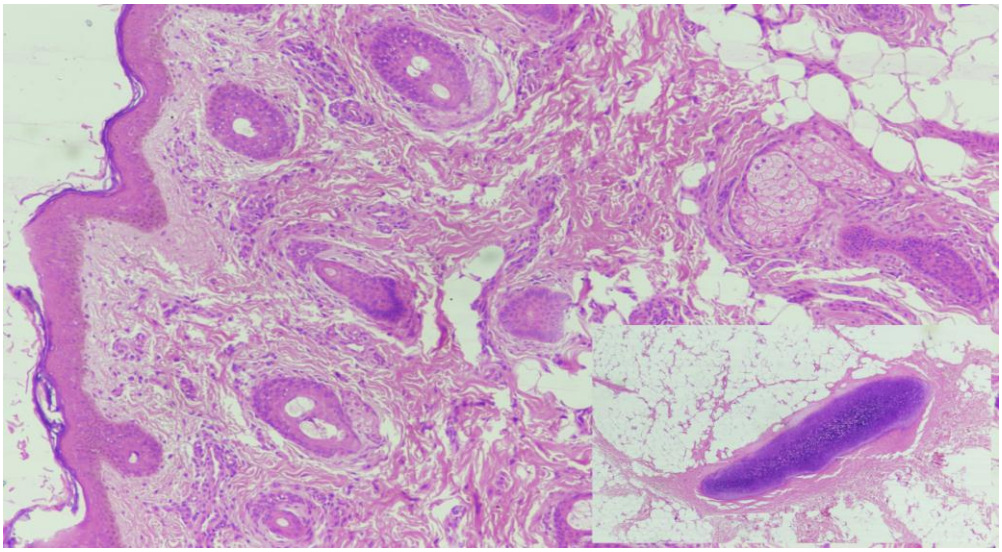

Figure 2: Microphotograph showing mild orthokeratosis epidermis with villus hair containing follicles, pilosebaceous glands and adipocytes in papillary dermis. (H&E; 400X). Inset shows cartilage at the center surrounded by adipocytes. (H &E; 100X).

DISCUSSION

The word tragus is derived from the Greek word tragos, meaning goat and referring to the hairy part of the ear. The term accessory stands for something additional besides the original. As such, the accessory tragus is an extra to the normal tragus.[1]

AT is related to second branchial anomalies. It may be solitary or multiple, unilateral or bilateral, sessile or pedunculated and is a relatively common benign congenital anomaly. The exact prevalence of AT as an isolated physical finding is not known but it has been estimated to be 1.7:1000 with slight male predilection.[4]

The tragus may develop in isolation due to anomaly in first branchial arch, but occasionally a defect in the second and third branchial arches leads to occuloauricular vertebral dysplasia. (Goldenhar syndrome).[5]

It commonly can occur anywhere along an imaginary line drawn from tragus to the angle of mouth, and uncommonly along the anterior margin of sternocleidomastoid muscle.

Diagnosis of AT is based on clinical appearance, anatomic location and history since birth. Its correct and prompt diagnosis is an essential prerequisite to prevent children from permanent hearing loss and in early detection of other hidden congenital cardiac, renal anomalies and syndromes which are commonly associated with familial AT. [6]

To conclude, if diagnosis of accessary tragus is made in isolation, it is important to screen the child for other congenital anomalies and referred to a specialist for routine ultrasonography for further evaluation.

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