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Case Report

Multiple Painful Bluish Nodules on a Young Man

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ABSTRACT

Glomangiomas are rare, benign vascular tumors originating from glomus cells. Clinically, they present as pink-blue nodules, painful to palpation. Histopathological examination is required for diagnosis. This clinical case represents a diagnostic challenge, highlighting the need to raise awareness of the rarity of this condition.

CLINICAL CASE

A 31-year-old man presented with a 1-year history of numerous painful nodules with progressive growth. His past medical history was relevant for familial hypercholesterolemia without current treatment. Family history was negative for vascular malformations. On physical examination, we found numerous non-tender skin color and bluish nodules, 0.5-1cm in diameter, on both arms and legs, with localized pain and someone upon pressure (Figure 1). We performed a skin biopsy and the histopathologic study revealed with hematoxylin and eosin, light microscope 40x irregularly shaped vascular spaces lined by endothelial cells surrounded by uniform collars of epithelioid cells forming a compact sheet. The lesion showed a myxoid stroma with enlarged fibroblasts and areas of keloidal collagen. (Figure 2).

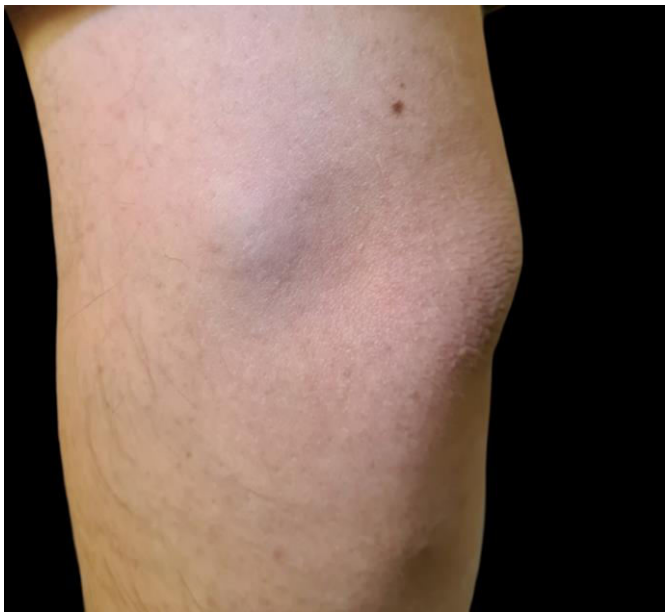

Figure 1: Numerous non. tender skin color and bluish nodules on left leg.

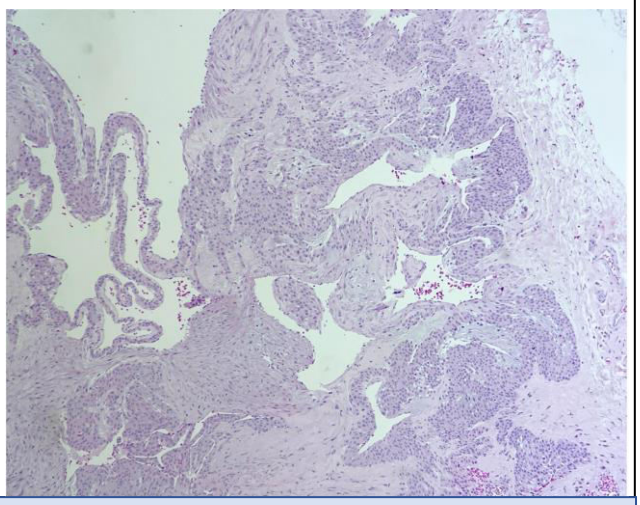

Figure 2: Histopathological study showing dilated venous channels surrounded by uniform glomus cell.. HE 10x.

DISCUSSION

Glomangiomas are benign vascular tumors arising from glomus cells, extremely rare, affecting commonly in children and males, only a few of cases with genetic background [1]. Glomangiomas clinically present as pink-to blue nodules, tenderness on palpation, usually solitary, but in a few cases can be multiple [1-3]. They are classified into 3 subtypes: localized (nodules confined to 1 anatomic location), disseminated (involve more than one location), and congenital plaque type (numerous confluent lesions, appearing like multiple or solitary plaques) [3]. Some of these tumors may have variations with hormonal changes like menstruation, pregnancy, and puberty [4], and some reports associated with trauma [2]. It is thought have different etiologies, frequently as sporadic tumors, but some reports with autosomal-dominant with incomplete penetrance The histopathologic findings are dilated venous channels surrounded by round uniform glomus cell, these cells stain with α-smooth-muscle actin and vimentin [5]. Multiple glomangiomas diagnosis can be a challenge, the differential diagnosis includes venous malformations like blue rubber bleb syndrome, multiple haemangiomas, spiradenomas, angiolipomas, leiomyomas (painful tumors), arteriovenous malformations, nodular Kaposi sarcoma, metastasic melanoma [2,3].

There are multiple treatment modalities like sclerotherapy, argon, and CO_2 lasers [5], but surgical excision seems to be the most effective, in cases where there is tenderness or cosmetic concern [1,3]. Observation may be an option in asymptomatic lesion [5]. Our patient underwent surgical excision of three the largest and most painful nodules.

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