

Clinical Image*Open Access, Volume 6***A case of pseudoepitheliomatous hyperplasia mimicking squamous cell carcinoma over gluteal region: Clinical image****Sushendra T^{1*}; Hetal Nakrani²; Ponnulekshmi³; Vishnupriya³**¹Professor, Department of Shalya Tantra, JS Ayurveda Mahavidyalaya, Nadiad, Gujarat, India.²Reader, Department of Shalya Tantra, JS Ayurveda Mahavidyalaya, Nadiad, Gujarat, India.³Lecturer, Department of Shalya Tantra, JS Ayurveda Mahavidyalaya, Nadiad, Gujarat, India.***Corresponding Author: T Sushendra**Professor, Department of Shalya Tantra, JS Ayurveda
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Description

Pseudoepitheliomatous hyperplasia (PEH) is a benign condition characterized by the proliferation of the epidermal and adnexal epithelium, closely resembling Squamous Cell Carcinoma (SCC). PEH is often confused with SCC [1]. We describe a case upon clinical suspicion of squamous cell carcinoma and a biopsy was conducted, confirming the diagnosis of PEH, which was then managed accordingly.

A 60 yrs old male patient non diabetic, non-hypertensive came to OPD presenting with swelling over right gluteal region associated with pain for 2 months. Initially it appeared as small as boil like and later rapidly increased in size. Patient had pain and discomfort while sitting for long time. There was no history of similar complaints in the past or in the family. On examination the mass measured about 4 cm x 3 cm x 3 cm with everted margins, with ulceration, necrotic tissue and fumigation over the center. On palpation slight tenderness with mild induration

surrounding the swelling. Regional lymph nodes were normal on palpation. Initially suggested USG of the local part which showed ill-defined exophytic soft tissue growth along right gluteal region. In order to rule out malignancy, biopsy was done which reported as Pseudoepitheliomatous hyperplasia. After the confirmation of the diagnosis the mass was excised under local anesthesia and was closed with Ethilon 3-0 with mattress suture and the suture was removed after 8 days and wound healed complete after 15 days.

References

1. Chakrabarti S, Chakrabarti PR, Agrawal D, Somanath S. Psuedo-epitheliomatous hyperplasia: a clinical entity mistaken for squamous cell carcinoma. J Cotan Aesthete Surg. 2014; 7(4): 232-4. doi: 10.4103/0974-2077.150787.

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| <p>U.S.G. LOCAL PART - Swelling over right gluteal region</p> <p>An approx. 4.1 x 3.1 x 2.7 cm (H x W x D) sized ill-defined Exophytic soft tissue growth is seen along the upper outer quadrant region of right gluteal region. Lesion shows internal vascularity & few tiny calcific foci within. Lesion shows possible loss of fat planes with underlying muscle plane.</p> <p>No c/o any localized collection or abscess formation.</p> <p>IMPRESSION:</p> <ul style="list-style-type: none"> • Ill-defined Exophytic soft tissue growth along the right gluteal region; • Possibility of Neoplastic etiology needs to be ruled out. Histopathological - biopsy correlation is suggested. <p>DR. TAPAN VADGAONKAR MD (RADIOLOGY)</p> <p>DR. SANDIP SHINDE MD</p> <p>DR. ANANDHAKRISHNAN MD</p> <p>DR. VISHNU RAO MD</p> <p>DR. SURESH MD</p> <p>8/9, Karmaveer Samraja, Nr. Bank of Baroda, VVV Road, Nadiad. Ph: (0268) 2529510 Mo: 087993 28510 EMERGENCY SERVICES AVAILABLE</p> | <p>BLUE CROSS CLINICAL LABORATORY</p> <p>Chk. Samraja Trust, Samraja Road, Nadiad. Ph: 0268 2543055, 2545455</p> <p>Dr. Tarunish Khakhria MD (Path. & Micro.)</p> <p>Name: [REDACTED] Location: [REDACTED] Ref. By: [REDACTED] Reg. No: 175V / Male Reg. Date: [REDACTED] Reg. No: 2401015170 Ref. Date: [REDACTED] Mgmt. of Referral: GGBR-1015524 / Ref. Time: 09/03/2025 10:40</p> <p>HISTOPATHOLOGY EXAMINATION</p> <p>RP. NO.: 968 / 2025</p> <p>Nature of Material: Lesion from gluteal region</p> <p>Gross Examination: Received specimen consists of multiple, pinkish, irregular skin cover soft tissue lot which measures 2.2 x 2.2 x 1.8 cms. 2.5 x 2.0 x 1.0 cms and 2.5 x 1.2 x 0.9 cms respectively. Partial autolysis is present. Representative sections are taken.</p> <p>Microscopic Examination: Sections reveal acanthosis, parakeratosis & hyperkeratosis. Underlying stroma shows marked lymphocytic infiltration. Focal neutrophilic infiltration & necrosis are seen.</p> <p>Diagnosis: Pseudoepitheliomatous Hyperplasia with necrosis.</p> <p>Notes: Slides & blocks are given with this report.</p> <p>Dr. Tarunish Khakhria MD (Path. & Micro.)</p> <p>Thanks for Reference</p> |
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USG REPORT

BIOPSY REPORT

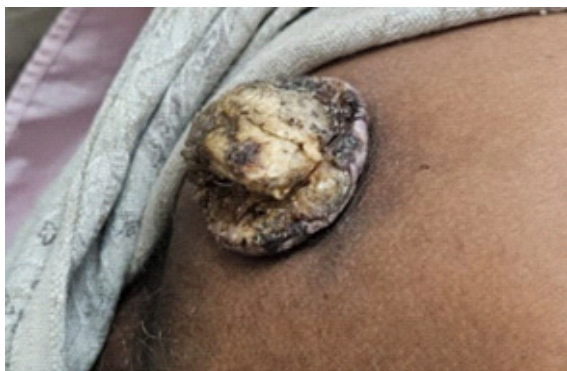


Figure 1: On the day of consultation.



Figure 2: Pre-operative.



Figure 3: Operative picture.



Figure 4: Post-operative.



Figure 5: After suturing.



Figure 6: After 15 days completely healed.