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Case Report

Acquired hemangioma of the external nose: a case report

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ABSTRACT

Hemangiomas of the nose are very rare lesions.They may be found in both paediatric and adult population.The various modalities of treatment may range from medical management to surgical management.We are reporting a benign vascular lesion near the nasal tip at the soft triangle aesthetic subunit in a 64 year old male which was treated by simple surgical excision using electrocautery and primary closure. Histopathological examination of excised specimen confirmed the diagnosis as hemangioma.

Keywords: Acquired, External, Nasal, Hemangioma

INTRODUCTION

Hemangiomas are benign vascular tumors.[1-3] It can occur both in paediatric and adult age group. Head and neck is a common site for haemangiomas. In facial hemangiomas, 15.8% show involvement of the nose, and the nasal tip is affected in 5.1%.[4,5] We are reporting a rare case of haemangioma at the soft triangle aesthetic subunit of the external nose.

CASE REPORT

A 64-year-old male patient presented to ENT OPD with a painless mass near the tip of the external nose since 1 month following history of fingernail trauma. There is history of bleeding from the lesion. It was initially small and has progressed to present size. On local examination a solitary, solid, nodular, reddish colour lesion was noted at the soft triangle aesthetic subunit of the external nose (Figure 1A and B). The lesion was about 1×1 cm in size. On palpation the lesion was nontender, soft to firm in consistency, well defined edges, with restricted mobility, bleeds on touch. Diagnostic nasal endoscopy was done and no abnormalities noted. A diagnosis of benign vascular lesion was made. Preoperative blood investigations were done and patient was posted in OT. Using electrocautery excision of the lesion was done under local anaesthesia and then primary closure done using silk sutures. Excised specimen sent for histopathological examination which gave a diagnosis of hemangioma. Sutures removed after 7 days (Figure 2). Patient followed up for 1 year and no recurrence noted.

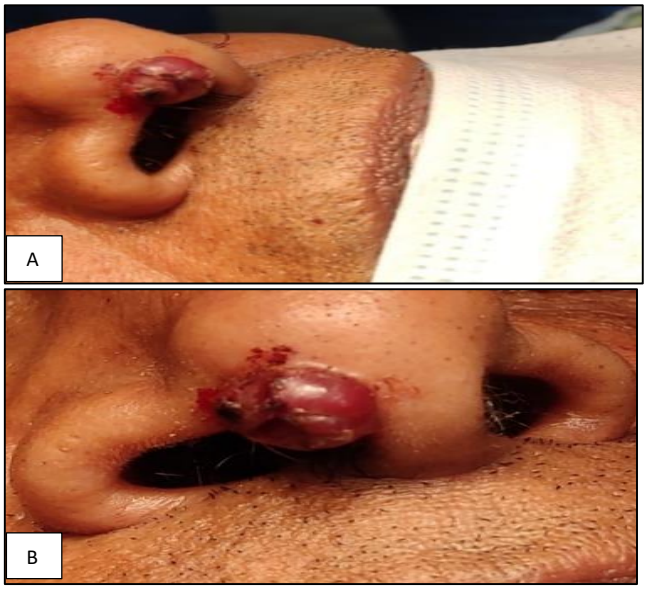

Figure 1 (A and B): A 1×1 cm vascular lesion at the soft triangle aesthetic subunit of the external nose.

Figure 2: Postoperative picture after 1 week.

DISCUSSION

Patients with nasal hemangioma develop many functional problems like nasal obstruction, alteration of nasal valve, ulceration, and destruction of growing nasal cartilage.[6] Patients also report to hospital because any lesion at such a location is visible to themselves and the people.

Patient's history, clinical examination helps in reaching at diagnosis of haemangioma in most of the cases.[7]

However, the radiological imaging investigations are important and help to confirm the vascular nature and identify venous, arterial, and lymphatic components as well as the involvement of deeper structures and intracranial connections. Kadriyan et al have used CT scan to see the involvement of deeper structures and intracranial connections.[6] Magnetic resonance imaging and magnetic resonance angiography have also been used to differentiate the type of hemangioma due to its capacity to confirm the diagnosis, determine the extent of the anomaly, classify the lesion appropriately, and document the associated abnormalities.[8]

The various treatment options for haemangioma include topical, systemic or intra-lesional applications of steroid, alpha 2a and 2b interferon injections, cytotoxic medications, angiogenesis inhibitors, embolization, cryosurgery, laser therapy and conventional surgery.[9,10]

Another interesting conservative treatment which has been used in pediatric patient is propranolol.[6]

In our case geriatric age group of patients, presence of comorbidities, superficial small sized vascular lesion, patients refusal to undergo extensive reconstructive surgery made us arrive at a decision to treat the vascular lesion by simple excision with the help of electrocautery and primary closure.

CONCLUSION

Hemangioma should kept as important differential diagnosis for such cutaneous vascular lesions of external nose. Choice of surgery should take various factors into account such as age of patient, size and depth of vascular lesion, comorbidities, anesthetic fitness, availability of surgeons trained in plastic/ reconstructive surgery.

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