

## Case Report

# Retroauricular Dermoid Cysts

Guerrissi Jorge Orlando\* and Márquez Esteban Eduardo

Division of Plastic Surgery, Argerich Hospital CABA, Argentine

## \*Corresponding author

Guerrissi Jorge Orlando, Division of Plastic Surgery, Argerich Hospital CABA, Av Corrientes 3545, Argentina, Tel: 54-911-66251394; Email: drmarquez-e@hotmail.com

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## Abstract

Dermoid cysts located in the cervical and head region are not frequent onset entities, being even rarer to find them in the retroauricular region. This type of benign tumor of congenital origin is, in the majority of cases, asymptomatic presenting as the only symptom the tumor that causes in many cases only an aesthetic discomfort. For this reason usually the diagnosis of these cysts is basically clinical and the treatment is always surgical.

## INTRODUCTION

Dermoid cysts are lesions located in the subcutaneous tissue, easily detectable, well circumscribed that do not produce pain; Are of mobile character and soft consistency. Its location is more frequent in the periorbital region, mainly on the side of the eyebrow (eyebrow tail cyst), nasal region (at the glabella level) and less frequently in the retroauricular area [1-2].

These congenital tumors of intrauterine origin are histologically composed of ectoderm and mesoderm containing hair follicles, sebum, glands and connective tissue.

This paper aims to create awareness within the surgeon's community of the existence of this pathology to be taken into account not only as differential diagnosis, but also to consider its treatment is always surgical.

## MATERIAL AND METHODS

From 2005 to 2015, 385 patients with different tumors in different areas of the craniofacial region were seen in the Plastic Surgery Division of the CosmeArgerich Hospital of CABA (Buenos Aires) Argentina.

Of these 385 patients 17.9% or 69 were malignant tumors and 82.1% were the remaining 316 benign.

Of the latter 42 (13.2%) were dermoid cysts of which only 4 (9.5%) were located in the retroauricular region (Figure 1A,1B)

The symptomatology in these four cases was similar. None of the patients reported a decrease in their hearing capacity or vestibular alterations. All presented a tumor and increased the size of it as the main symptom. The mobile, painless and soft density was common patterns. Also the presence of sebaceous material inside the cysts was another common factor.

The mean size of these retroauricular lesions located on the mastoid was 4 cm high, 3 cm wide and 3 cm projection.

In one of the cases the surgical exploration showed that the cyst had a pedicle that extended to the upper region of the auricular region and ended on the same (Figure 2A,2B)

Two were in women and the other two in men. In all cases the age of onset was before the age of 25 years old.

## DISCUSSION

These lesions called dermoid cysts of the retroauricular region are very rare tumors that originate in gestation and are composed of ectoderm and mesoderm containing appendages of the skin such as glands, hair and hair follicles [3,4].

Its development is due to the capture of ectodermal elements towards deeper layers along the lines of embryonic closure during gestation (Figure 3).

Its structural characteristics and its location make it necessary to perform a differential diagnosis with other entities such as lymphadenopathy and connective tumors. The cysts are usually round, painless and soft tumors that increase in size as time passes.

The presence of a pedicle extending to the upper atrial region makes it possible to suspect that the cyst may have been generated in that region, then spread through the growth to the retroauricular region (Figure 2A,2B).

The manifestation of the cysts is usually related to the accumulation of sebum that occurs with the passage of time causing the growth of cysts, which is why they are usually not visible at birth but begin to show symptoms over the years.

There is no gender preponderance. Complementary studies such as ultrasound, tomography or nuclear magnetic resonance may be useful for the study, but since its characteristics are relatively simple to observe during physical examination, the diagnosis is usually basically clinical with pathological confirmation. Its resolution is surgical and the rate of recurrence is common as with other cysts, which is why complete resection should be ensured during the surgical procedure [5,6].

The publications about this pathology in the world literature are scarce; Few authors have reported cases and suggest the presence of a painless tumor, requiring histological confirmation after surgical removal [7].

## CONCLUSION

Dermoid cysts of the retroauricular region are very rare benign entities of congenital development formed by ectodermal and mesodermal structures. Its most frequent symptom is the appearance of a tumor of soft and mobile characteristics. Its diagnosis is clinical, the confirmation is by pathological anatomy and its treatment is surgical.

## REFERENCES

1. Meagher PJ, Morrison WA. An unusual presentation of bilateral prominent ears. *Br J Plast Surg.* 2001; 54: 366-367.
2. De Souza BA, Dey C, Carver N. A rare case of dermoid cyst behind the ear. *PlastReconstr Surg.* 2003; 112: 1972.
3. Hashimoto K, Lever W. Tumores de los apéndices de la piel. En: Fitzpatrick T, Elisen A, Wolff K, Freedberg I, Austen K: *Dermatología en medicina general.* Segunda edición. Editorial Panamericana; 1980; 547-661.
4. Laberge J, M<sub>i</sub>Nguyen L, Shaw K. Teratomas, dermoids and other soft tissue tumors. En: Ashcraft K, Murphy J, Sharp R, Sigalet D and Snyder Ch (eds): *Pediatric Surgery;* 3<sup>rd</sup> ed. Philadelphia: WB Saunders Company; 2000; 905-926.
5. McAvoy J, Zuckerbraun L. Dermoid cysts of the head and neck in children. *Arch Otolaryngol.* 1976; 102: 529-531.
6. Myer CM. Mansas cervicales congénitas, en Paparella M, Shumirick D, Gluckman J, et al. *Otorrinolaringología.* 3<sup>a</sup> Edición. Buenos Aires: Editorial Panamericana, 1994; 3: 2954-2963.
7. Zhao D, Han Y, Chen Y Qiu J. An unusual dermoid cyst in subcutaneous tissue of the mastoid region: A case report *Exp. Ther Med.* 2013; 6: 75-76.

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