Fibroepithelial Polyp of Nail Bed

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ABSTRACT

Fibroepithelial polyp is a benign condition in which there is outgrowth of epidermis and dermis along with fibrovascular tissue in a polypoid fashion. It is also known as fibroma, acrochordon and skin tag. They are usually found in skin folds of areas such as axilla, neck, inguinal or submandibular region. It is generally considered pseudo tumor caused by hyperplasia or inflammation secondary to a local lesion. In this case report a rare type of lesion is described that was found at the nail bed. It was removed surgically.

Key words Fibroepithelial polyp, Acrochordon, Skin tag.

INTRODUCTION:

Fibroepithelial polyp is one of the most frequent cutaneous lesions found at different anatomical regions.^{1,2} Three types namely multiple small papule of 1 to 2mm in size, multiple or single filliform small growth and single bag like structure having a stalk, are described.³ Herein we present rare case of fibroepithelial polyp arising from the nail bed.

CASE REPORT:

A 55-year old patient presented with a history of growth arising from the nail bed of first toe of right foot. He had no history of trauma. No such growth was found in other parts of the body. This growth resulted in destruction of nearly half of the normal nail. It was attached to nail bed through a narrow short stalk which was embedded into the depth of tissue. It was slightly painful on touch. On examination it looked like acrochordon or fibroepithelial polyp (Fig. I). It was removed surgically under local anesthesia. Histopathology of specimen revealed fiboepithelial polyp with surface covered by stratified squamous epithelium. Underlying tissue showed fibrosis and prominent vessels. Scattered chronic inflammation was also seen (Fig. II).

DISCUSSION:

Fibroepithelial polyp has mesenchymal and ectodermal origin. They are usually found in 25% of

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Fig. I: Fibroepithelial polyp arising from nail bed.

the population and more frequently in elderly.⁴ They are usually found in skin folds. They are also found in genital region more often in women of child bearing age. Hormonal sensitivity is suggested as an etiology.^{5,6} It is generally considered as a pseudo tumor caused by hyperplasia or inflammation secondary to a local lesion. The etiology is not clear. Mostly it is benign, but can have a low malignant potential.

In a study related to giant fibroepithelial polyp it was found in axilla and obesity was regarded as trigger for growth.⁴ Insulin resistance and obesity has association with the growth of fibroepithelial polyp.⁷ These polyps tend to regrow if not removed completely.



Fig. II: Histopathological picture of fibroepithelial polyp

Small polyps require cauterization or cryotherapy while larger polyps need surgical removal.⁸ Fibroepithelial polyps arising from the nail bed is extremely rare and this case is reported to sensitize the readers about clinical presentation and histopathological features of this condition.

CONCLUSION:

Fibroepithelial polyp arising from nail bed is rare. These polyps regrow if inadequately removed. Surgical removal therefore has to be meticulous.

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Received for publication: 07-06-2021

Accepted after revision: 15-08-2021

Ethical statement: Consent for reporting was taken from the patient.

Author's Contributions:

Sameeah Hanif: Concept, literature review, drafting of manuscript and final approval of manuscript. Muhammad Nawaz: Report writing.

Competing Interest:

The authors declare that they have no competing interest.

Source of Funding: None

How to cite this article:

Hanif S, Nawaz M. Fibroepithelial polyp of nail bed. J Surg Pakistan. 2021;26 (2):84-5. Doi:10.21699/jsp.26.2.10.