A Rarity, Oncocytoma of the Eyelid
Nadir Bir Durum, Gözkapağı Onkositomu

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Abstract
Eyelid tumors are most common in the skin, and lacrimal gland and adnexa origin are very rare. Although oncocytoma is generally located in the internal organ, it is one of the rare areas where it can hold around the eyes. Oncocytomas (oxyphilic adenomas) is one of the rare benign tumors that usually appear as cystic lesions around the eyes and can be diagnosed with punctum biopsies. If it is not excised totally, it is one of the tumors that can progress locally and become malignant. Although the cases with perocular, peripunktal and lacrimal glands are located in the literature, eyelid placement is very rare.

Keywords: Oncocytoma, oxyphilic adenoma, eyelid

Case Report
A 66-year old man presented in 2014 with a three year of slowly enlarging five lesions with the diameter of 0.2 cm min to 0.4 cm max. at the left lower eyelid (Image 1). According to the patient there was no discomfort or pain but only cosmetic problem on first examination. Lesions were found to be brownish to reddish in colour, round shaped and tended to fluctuate. All of them were completely removed and excision material was sent to pathology department.

Results
The light microscopic examination showed a tumor composed of tubulopapillary structures lined by large cells with eosinophilic granular cytoplasm (Figure 1, 2). No atypia, mitotic activity, necrosis, or hemorrhage was identified. The histological diagnosis of oncocytoma was established. By the way the patient was followed up for

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Cite this article as: Karakol P, Balıkçı T, Leblebici C. A Rarity, Oncocytoma of the Eyelid.
one year, week by week prior to the surgery for first month and once every three months respectively. Radiotherapy was not a choice of treatment after the operation. There was no sign of recurrence neither metastatic lesion through this period. Therefore a complete surgical excision and a closure with advancement flap made from lower lid skin were performed. We complied with all the reconstructional principles of eyelid closure. A comfortable and cosmetically satisfactory result was gained with no complaints from the patient who lasted being asymptomatic.

Discussion

Brick and Schiagenhauff were mentioned the oncocytes in the opthalmic regions by noting their presence in the lacrimal glands (5). First case of an oncocytoma of the ocular adnexa reported by Radnot (6). In the literature there are limited cases of the upper of lower eyelid with oncoytomas. The reason behind this is the rarity of the oncocytomas of ocular appendages. These tumors may develop in the lacrimal glands (7), sac (7-10), and the caruncle (7-9,11-15). Some palpebral oncocytomas like this case originate from the epithelium of Moll’s gland or from the epithelium of the lacrimal duct (16-19). In spite of appearance of oncocytes in the lacrimal apparatus, palpebral involvement is a rare site for tumor formation (20). These tumors ordinarily grow slow and stay asymptomatic. Although local recurrence can be seen sometimes in malign formations, notably after partial excisions. It was reported by Perlman et al. (21) and Tomic et al. (22) recurrence could be likely after surgery. So complete excision, close observation, routine follow up is advised. In our case, because the tumors were in a plural-flat form it was complicated to be sure for deciding whether they were originated from lid or somewhere else. Oncocytomas manifesting themselves in the ocular adnexa region are rare. Regardless of their benign features, developing in to a malignant pattern always possible.

In the current case we addressed oncocytomas could gone unnoticed, often referred as a different skin lesion because of their nevus-like appearance to the naked eye. We need to study and examine these tumors more precisely for a proper diagnosis, determination and rightful treatment. This can lead us finding the tumors’ exact origin, foreseeing malignant progression and also describing the clinical-histological factors truly. By reporting a patient having oncocytomas on his lower eyelid we aimed to emphazise this issue particularly.
**Ethics**

**Informed Consent:** All forms of consent are available to share the patient’s photos and data after surgery.

**Peer-review:** Externally peer-reviewed.

**Authorship Contributions**


**Conflict of Interest:** The authors declare that there is no conflict of interest with regard to this manuscript.

**Financial Disclosure:** No financial support was received from a person or a company for writing this case report.

**References**