

Case Report

A Giant Cutaneous Horn in A Case of Lupus Vulgaris

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Abstract

Observations: Cutaneous horn is a clinical diagnosis referring to a conical projection above the surface of the skin that resembles a miniature horn. We report a case of cutaneous horn arising from long standing lupus vulgaris. To the best of our knowledge there appears to be no previous mention in the literature of a cutaneous horn developing from lupus vulgaris.

Introduction

Cutaneous horn is a relatively uncommon lesion consisting of a projectile, conical, dense, hyperkeratotic nodule, which resembles the horn of an animal [1]. Horny plugs or outgrowths may be caused by various epidermal changes such as actinic keratosis, squamous cell carcinoma, basal cell carcinoma, Bowen's disease, viral warts, molluscum contagiosum, seborrhoeic keratosis, keratoacanthoma or marsupialised epidermoid or tricholemmal cyst. The cutaneous horns are usually benign, however, malignant or premalignant lesions might associate with these lesions [2]. Because of their relationship with an underlying malignancy, the lesions must always be considered for histopathological evaluation.

Case Report

A 70 year old man, smoker, farmer by occupation presented with asymptomatic reddish brown discoid plaque of 20 years' duration covered by psoriasisiform scales. The plaque which was 7×10 cm in size and localized on the right back was cen-

trally atrophic with peripheral extension. There was a large cutaneous horn about 4 cm long present for the last one year arising from upper and medial aspect of plaque which was tender by palpation and covered by haemorrhagic crust at its base. A mild induration was present at the base [Figure 1].

There was no regional lymphadenopathy. Haemogram was normal except for raised ESR. Tuberculin



Figure 1. Giant cutaneous horn on upper and posterior aspect of large atrophic plaque covered with psoriasisiform scales

sensitivity was positive. Histopathology showed the formation of typical tubercles consistent with tuberculosis. Secondary changes superimposed were epidermal thinning and atrophy and acanthosis with compact hyperkeratosis at the base of cutaneous horn, but no features of malignancy were identified.

Discussion

Cutaneous horns, also known as cornu cutaneum, are unusual keratinous skin tumors with a diameter of few millimeters to many centimeters with the appearance of horns, or sometimes of wood or coral. They are usually small and localized, but can rarely have a larger size [3]. A cutaneous horn is not a particular lesion but is a reaction pattern of the skin. Although often benign, they can also be malignant or premalignant. Approximately 40% of cutaneous horns represent precancerous lesions called actinic keratoses [1]. Malignancy is present in 16-20% of cases, with squamous cell carcinoma being the most common type [4, 5]. Tenderness at the base of the lesion and lesions of larger size favor malignancy, but no features of malignancy were found in our case. Tenderness and haemorrhagic crust in our case were due to repeated trauma with clothing.

Conclusion

Cutaneous horns usually appear on exposed skin areas in elderly persons. Although the horns are usually benign, the important issue in this condition is not the horn itself, which is just dead keratin, but rather the nature of the underlying disease. This case of cutaneous horn is unusually large, arising from long standing lupus vulgaris.

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