

## CASE 11

A 15-year-old Thai woman from Rachaburi

### Chief complaint:

Asymptomatic brownish tumors on left thigh for 5 years

### Present illness:

The patient presented with asymptomatic, slowly progressive soft tumors on her left upper thigh for 5 years. The tumors were partially excised 2 year ago. The remnant of lesion gradually increased in size and she was referred to Ramathibodi hospital.

### Past history:

No underlying disease.

### Family history:

Nil

### Physical examination:

Large multilobular, brownish, soft, non tender tumors with wrinkled surface on the left upper thigh.

### Histopathology:

Groups of fat cell embedded among collagen bundle of the upper dermis the epidermis show papillated surface with protuberant projection.

**Diagnosis:** Nevus lipomatosus cutaneous superficialis - classic type

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**Consultant:** Penpan Wattanakrai



Fig. 11.1

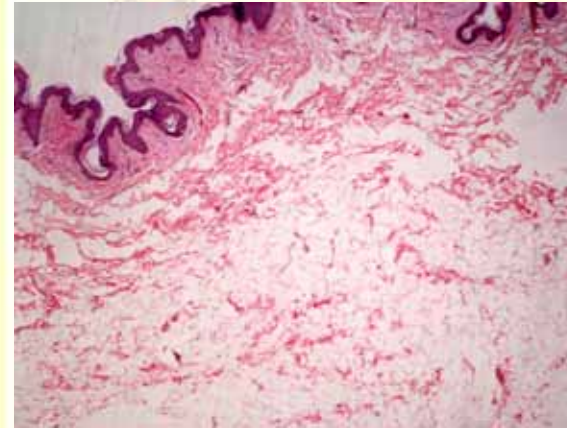


Fig. 11.2

### Discussion

Nevus lipomatosus cutaneous superficialis (NLCS) is an uncommon idiopathic skin malformation, classified into 2 clinical types, a multiple form (classic type) and a solitary form. The classic type usually presents at birth or develops during the first two decades of life. Morphologically, the lesions are soft, non tender, skin-colored, yellow or brown papules and nodules with often coalesce into plaques varying in size.

The surface is either smooth, wrinkled, cerebriform, verrucoid with comedones or peau d' orange like. These lesions occur most commonly in the pelvic girdle region particularly the buttock and usually remain static although some continue to enlarge many years. The distribution is usually zonal or along the lines of the skin folds.

Solitary type usually occurs after the age of 20 years, consists of a solitary papule or nodule with no particular distribution. NLCS are usually asymptomatic.

There are no associated systemic abnormalities, sex predilection or familial trend.

### Treatment

Treatment is usually not necessary in NLCS unless for cosmetic reasons. Simple surgical excision is sufficient with no evidence of recurrence after excision.

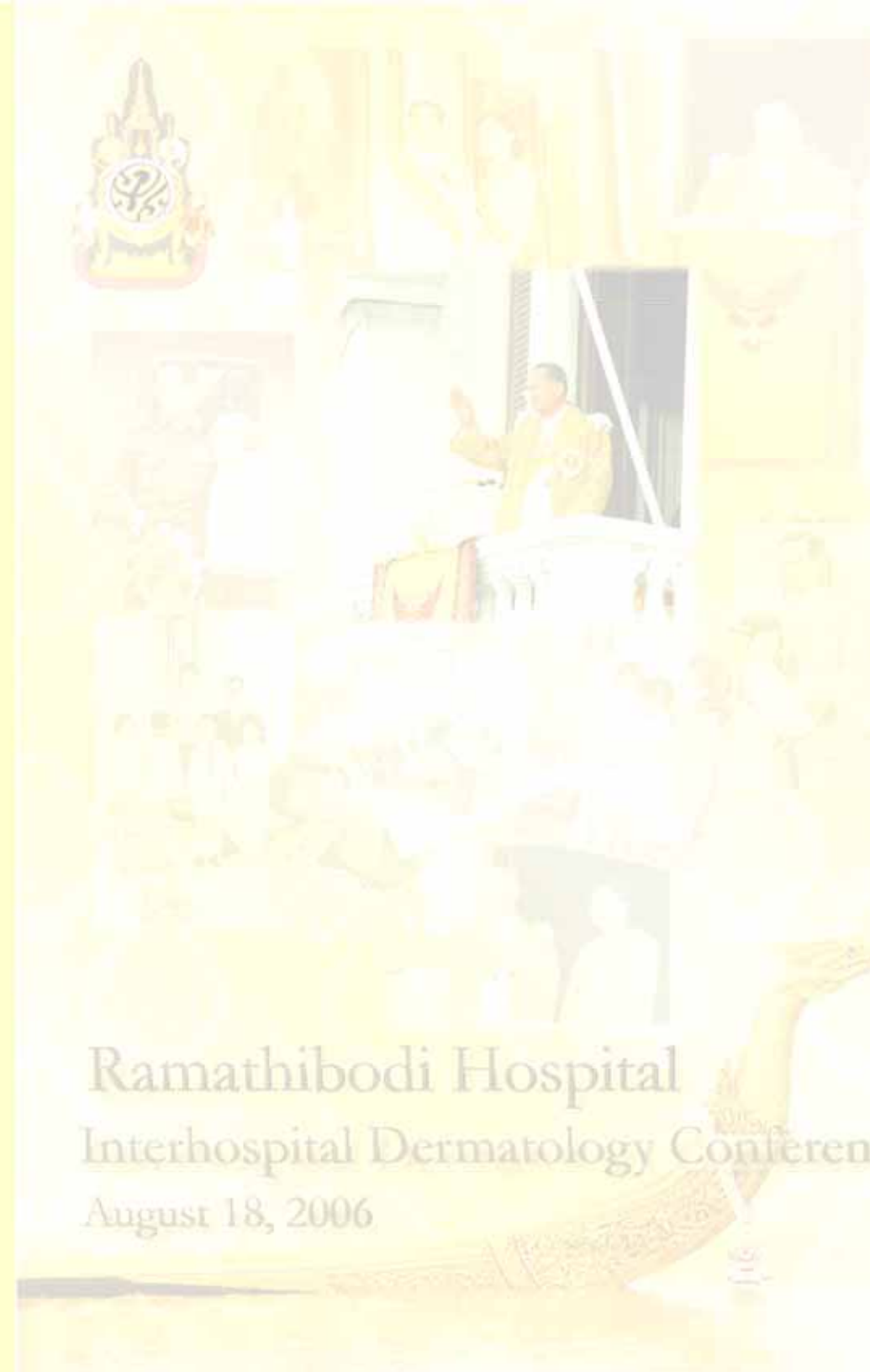
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