

## Introduction

Eccrine spiradenomas are rare, benign skin tumors that are thought to arise from eccrine sweat glands. They are usually solitary and are often painful. They have the predilection for head and neck with trunk and extremities involving rarely. A rare, vascular variant of this entity, giant vascular eccrine spiradenoma is essential to be considered in the differential diagnosis of highly vascular tumors of the skin and soft tissue owing to their significant diagnostic challenge.

## Case Report

We describe a case of giant vascular eccrine spiradenoma on an unusual site in a 63-year-old African American male with a history of diabetes mellitus and Hepatitis C. He presented with a 3.0 cm, mobile, non-tender, firm, cystic mass, enlarging for 2-3 months on the medial side of the left knee. Grossly, the mass had the appearance of a large follicular cyst. It was completely excised intact from the surrounding soft tissues and fat. The H&E staining revealed a circumscribed, unilocular area of round, basophilic, dense nest of cells with large vascular channels in the dermal region. On higher magnification, the cells were arranged in a reticular pattern showing two populations of cells, the outer basaloid cells and the inner paler slightly eosinophilic cells (Figure 1A and B). Immunohistochemistry was performed to determine the eccrine component of the cells which stained positive with CEA in

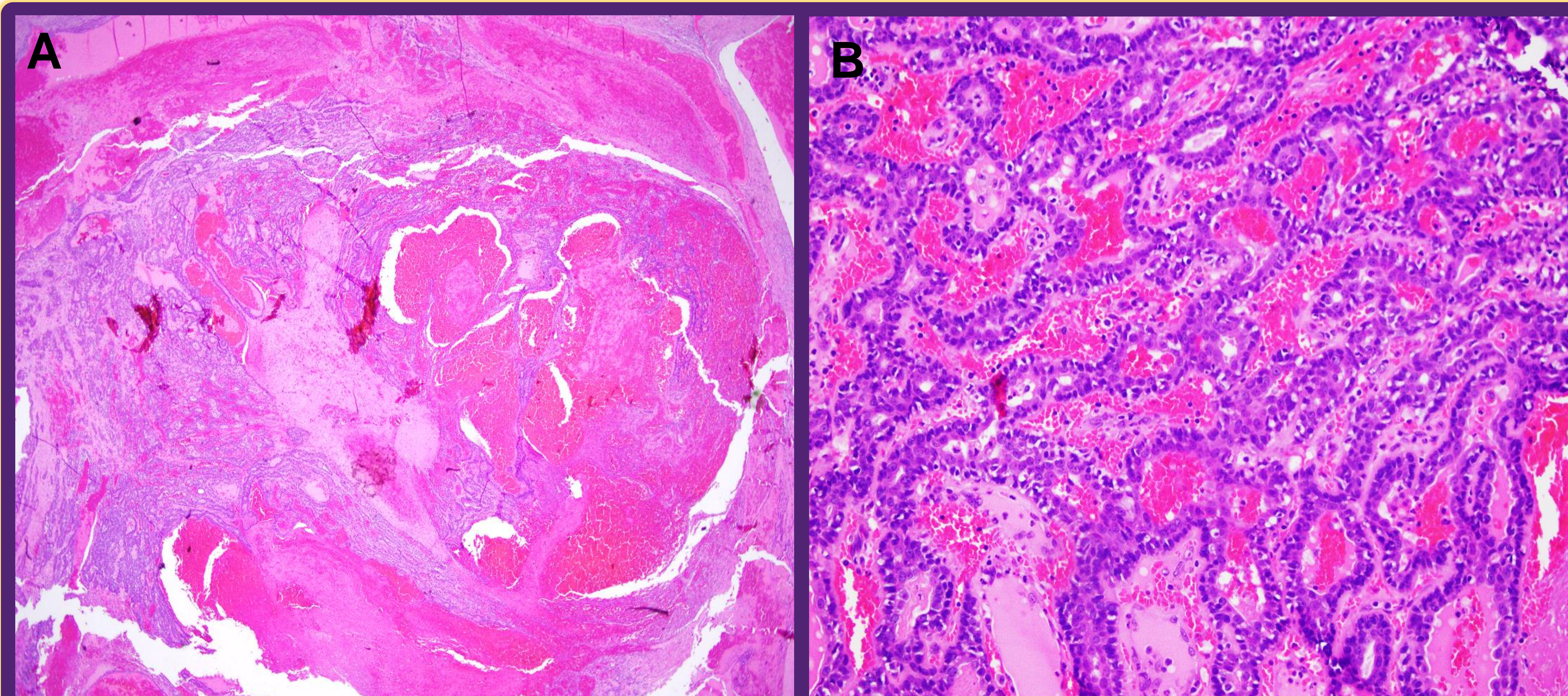


Figure 1. A) Tumor with ectatic vascular channels

B) High magnification showing two population of cells

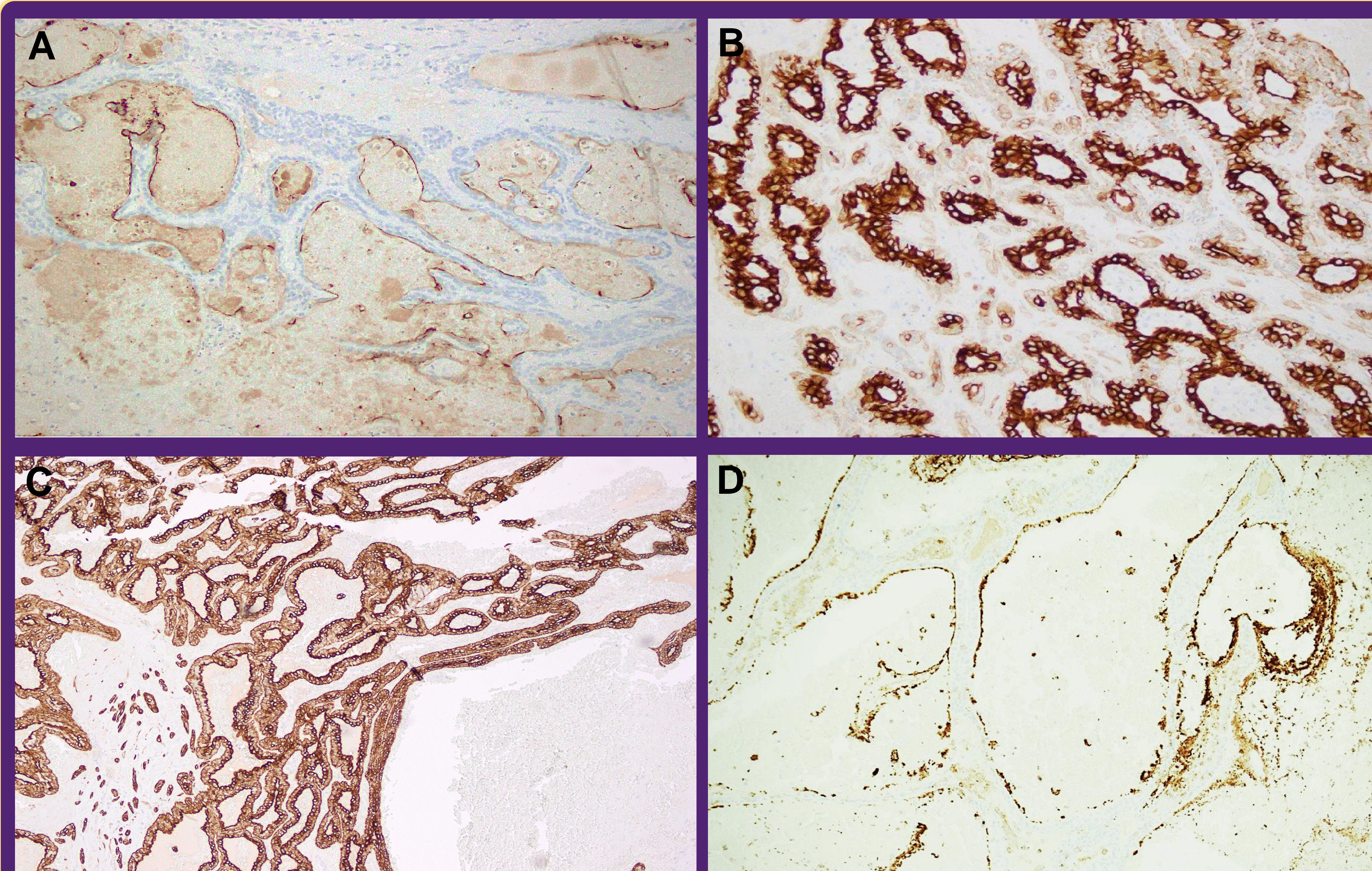


Figure 2. Immunohistochemistry profile of the tumor A) CEA B) Cam 5.2 C) CK7 D) CD31

the duct like structures (Figure 2A). Other epithelial markers used to highlight the basaloid cells were Cam5.2 (Figure 2B), p63, CK7 (Figure 2C) and Calponin. The cells lining the vascular channels were positive for CD31 (Figure 2D). The morphology and immunohistochemistry is consistent with an eccrine spiradenoma. With the hemorrhage and ectatic vascular component, this is best classified as a giant vascular eccrine spiradenoma.

## Conclusions

Giant vascular eccrine spiradenoma is identified by its abnormally large size and a notable abundance of vascular components. The enlargement of vascular structures, the propensity for bleeding, and the presence of ulceration in this condition present substantial diagnostic complexities, as it closely mimics other vascular neoplasms such as angiosarcomas and glomus/glomangioma tumors. In our specific case, the lesion emerged in an uncommon location without causing any pain and exhibited an elevated quantity of enlarged vascular spaces, further complicating the diagnostic evaluation.

## References

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The authors have nothing to disclose.