

LYMPHANGIOMA CIRCUMSCRIPTUM

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ABSTRACT

Diagnosis of lymphangioma circumscriptum was made in a 21-year-old patient with several, clearly demarcated skin lesions, with the diameter of 2 - 8 mm, on scrotum, penis and pubic area as well as on upper medial parts of thighs. Skin alterations appeared clinically as warty lesions and vesicles. The first skin changes appeared when he was 17. When he was 5, he was submitted to the surgery for bilateral cryptorchidism. There was a sporadic outflow of transparent liquid in the affected areas. Histopathological examination showed dilated lymph vessels in papillary and reticular dermis. In some segments the dilated lymphatics extended to the epidermis that was atrophic in these areas.

Radioisotopic lymphography of the affected area revealed a superficial lymphedema where the outflow was extremely slowed down. A communication between skin lesions and lymphatic vessels of pelvic and inguinal area was noticed.

Lymphangioma circumscriptum shows highest incidence in infancy, usually it is present by the age of 5, but it may appear in adolescence and adult life. However, acquired lymphangiomas appear years after the occurrence of predisposing factors, such as surgical procedures, keloids, infections, scleroderma and radiotherapy.

The question to which extent the operation of cryptorchidism played a role in the pathogenesis of lymphangioma in our patient remains open. The patient left the hospital immediately after the diagnostic procedures were done.

KEY WORDS

lymphangioma circumscriptum, acquired lymphangioma, case report

INTRODUCTION

Lymphangioma circumscriptum of the skin is a relatively rare disorder of lymphatic vessels in which the main features are saccular dilated superficial lymphatics lined by a single layer of endothelial cells. Clinically it appears as clusters of thin-walled translucent vesicles, usually described as "frog spawn"

but sometimes there are only a few scattered vesicles within a circumscribed area. They are mostly filled with a clear colorless fluid. Occasionally, because of an admixture of blood, their color ranges from pink through red to black, depending on amount of erythrocytes and their degradation products they contain. (1)

