Fig. 10. Erythrokeratoderma congenitalis symmetrica progressiva?

Eccrine Spiradenoma

Presented by Gerd Michaelsson

This 61-year-old gardener has had intensive tenderness under the left heel for the previous 5 years. Nothing is known about any related trauma. A slowly growing, soft swelling was noted at the same time in the tender area. During recent years the condition has been stationary, but when touched or when walking the swelling was intensively tender. Cold or heat had no influence on the symptoms.

The swelling was about 15 mm in diameter and the skin in this area was thin and shiny (Fig. 11). At biopsy it seemed that the growth was within a capsule and contained disintegrated tissue which, to a large extent, could be picked out. The biopsy specimen consisted of tumour tissue with quite tightly packed cells with large nuclei and sparse cytoplasm. The cells often formed narrow, tubular structures. Here and there the cells were arranged as in a sweat gland and in some areas there was an abundance of vessels. The diagnosis was eccrine spiradenoma. Glomus tumour was considered a relevant differential diagnosis. Considering the definite epithelial appearance and the sweat gland-like structure as well as the vessel appearance, the picture was interpreted more as an eccrine spiradenoma than glomus tumour.

Discussion

L. Juhlin: This is a very unusual location for an eccrine spiradenoma. When we first saw this lesion of the sole we thought it might be an eccrine poroma; however, this tumour is not or only slightly painful. The intensive tenderness of the patient’s lesion and its histology strengthens a diagnosis of eccrine spiradenoma.

Scleredema Buschke

Presented by Hans Hammar and Lennart Juhlin

This 38-year-old bookstore assistant was healthy until October, 1969, when he had a bronchitis and complained of muscular weakness. He was treated with doxycycline for 10 days. In January, 1970, his muscular weakness increased and he had difficulty in breathing. He could not take more than a few steps at a time on stairways and could only ski about 500 metres on level ground. The skin on his face and over the upper part of his trunk became thick and firm. It was also dry and itching. On four occasions he suddenly and without warning felt his face flushing and he became dizzy.

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