

Sebaceous Cell Carcinoma of the Ocular Region

Babatope Lanre Awosusi*

King Khalid Hospital, Almajma'ah, Saudi Arabia

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***Corresponding author:** Babatope Lanre Awosusi, King Khalid Hospital, Almajma'ah, Saudi Arabia, Mobile: +234 803 824 8725, Email: awosusilanre2@gmail.com

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Introduction

Background: Sebaceous cell carcinoma is a rare and potentially aggressive adnexal neoplasm with predilection for peri-ocular sites¹. Most commonly, the Meibomian gland and the gland of Zeis in the eyelids, caruncle and eyebrow are affected¹.

Case presentation: Patient presented with a fleshy growth over the nasal aspect of the left eye of 6 months duration with progressive increase in size and loss of vision in the eye. Computed tomography (CT) scan done showed a large, irregular mixed density moderately enhancing left orbital mass. She had a left orbital exenteration done and histopathologic examination of sections of the tumour showed a malignant epithelial neoplasm composed of moderate to markedly pleomorphic cells disposed in nests, cords and sheets invading a desmoplastic stroma and the sclera. The cells have moderately pleomorphic vesicular nuclei, prominent nucleoli and foamy to clear cytoplasm with distinct cell membranes (**Figures 1 and 2**). Features are in keeping with a sebaceous cell carcinoma. She received orbital external beam radiation to the orbit and systemic chemotherapy and is tumour-free on regular follow-up post-treatment.

Conclusion: Sebaceous carcinoma is a rare malignant neoplasm, which can clinically and histologically mimic other benign conditions, thus clinicians and histopathologists require a high level of suspicion for timely diagnosis. Complete tumor eradication remains a challenge hence close patient follow-up is critical to identify recurrence.

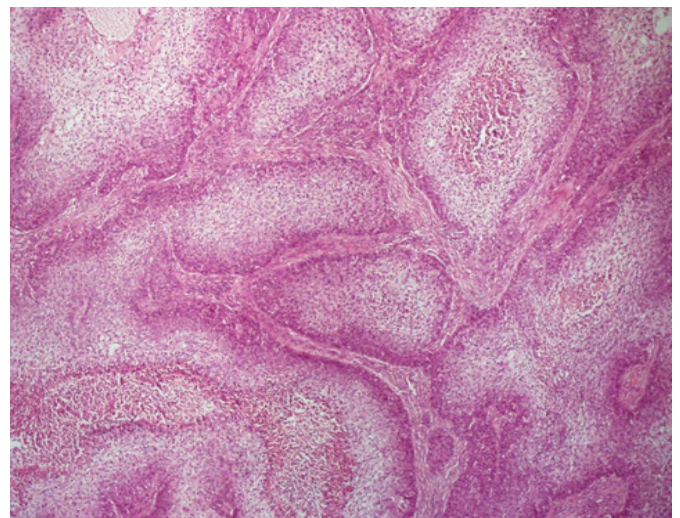


Figure 1: Photomicrograph showing the histology of sebaceous cell carcinoma: sebaceous epithelial cells are disposed in lobules interspersed by fibrous septae. Haematoxylin and eosin stain. X40 magnification.

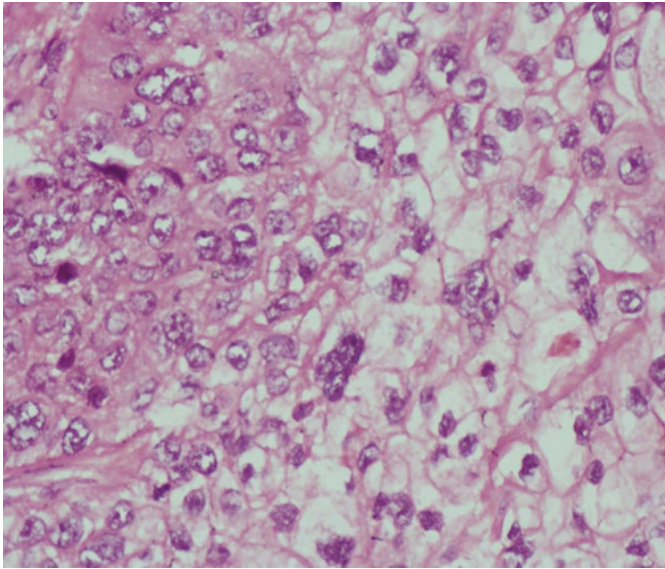


Figure 2. Photomicrograph showing moderately differentiated sebaceous epithelial cells with abundant foamy to clear cytoplasm. Haematoxylin and eosin stain. X400 magnification.

References

1. Kylo RL, Brady KL, Hurst EA. Sebaceous Carcinoma: Review of the Literature. *Dermatol Surg* 2015;41(1):1-15.