# LARGE SEBACEOUS CYST AT THE BUTTOCK

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#### **ABSTRACT**

Sebaceous cyst or epidermal cyst, epidermal inclusion cyst and epidermoid cyst is an epithelial cyst of the skin due to proliferation of surface epidermal cells within the corium, arising from occluded pilosebaceous follicles and containing a laminated, cheesy, oderiferous keratious epithelium (1). We present a case of large buttock sebaceous cyst with imaging of plain film and ultrasonography.

## **CASE REPORT**

A 40-year-old male patient had a mass at left buttock for 5 years. The mass was soft to firm and was not tender. The mass had grown in size slowly. Plain film at left buttock region showed both ill and well defined borders, soft tissue density mass (Fig. 1). The mass did not produce any bone changes. Ultrasonography of the mass showed a well defined border mass, with homogeneous low echoic pattern and diffuse scattered uniformed hyperechoic internal echo. There was no posterior enhancement or acoustic shadowing (Fig. 2). Aspiration of the content revealed cheesy material and the whole mass was totally removed. The mass was proved to be sebaceous cyst.

## **DISCUSSION**

Sebaceous cysts are usually asymptomatic unless they grow or become infected. There were few reports on imaging findings in this pathology outside the central nervous system except lesions at the breasts and testicles. In the breast, the lesions are sharply defined and of high rediographic density. Sonographically, the masses are hypoechoic, very well defined and have scattered low-level internal echoes with posterior acoustic enhancement (2). In the testicles, the lesions had variable sonographic characteristics (3,4). They have been described as sharply circumscribed lesions within the testicular parenchyma. The cyst was usually an encapsulated round or oval lesion 1-3 cm in diameter. The echogenicity of the lesions may be low, high or mixed. Sonograms may show a mass with a "target"

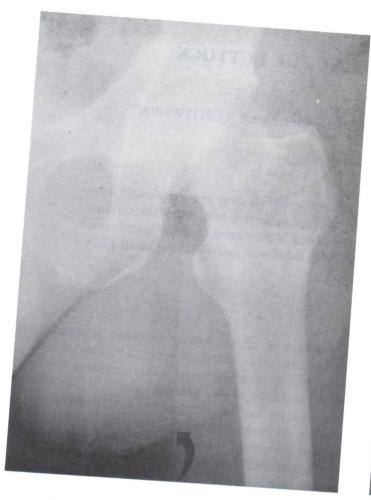
appearance (a central area of increased echogenicity surrounded by a sonolucent zone), a sharply defined mass with hyperechoic margins representing a rim of calcification, or a well defined, solid mass with an echogenic rim and high intensity echoes throughout (5). Malvica (6) reported an unusual sonographic findings of epidermoid cyst of the testicle. It showed a relatively hypoechoic mass. Echoes within the mass had a lamellar, swirling configuration similar to the cross section of an onion. Alternating rings of dense echogenicity and sonolucency were present. Echogenicity was most prominent in the central portion of the lesion. The outermost band was relatively sonolucent. The lesions was well circumscribed and surrounded by normal testicular parenchyma.

Yasumoto (7) reported two cases of epidemoid cysts at the left submandible and right lower lip. The border of both lesions were smooth. The internal echo level was echogenic, the echo was coarse and hemogeneous. Posterior echo was no change or slightly enhanced.

There was no report of large sebaceous cyst by imaging at the buttock area as shown in our case.

### REFERENCES

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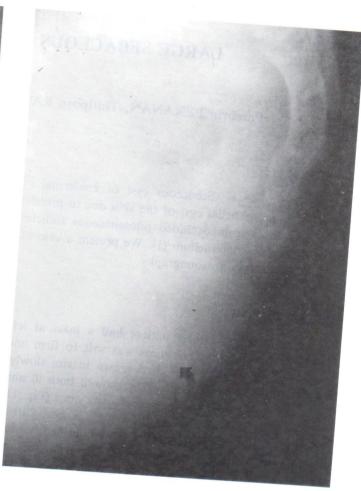


Fig.1 A,B Ap and lateral views of the buttock showed both ill and well defined border-soft tissue density mass. The mass did not produce bony changes.



Fig. 2 Ultrasonography of the mass showed a well defined border mass, with homogeneously low echoic pattern and diffuse scattered uniformed hyperechoic internal echo. There is lack of posterior enhancement or acoustic shadow.

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