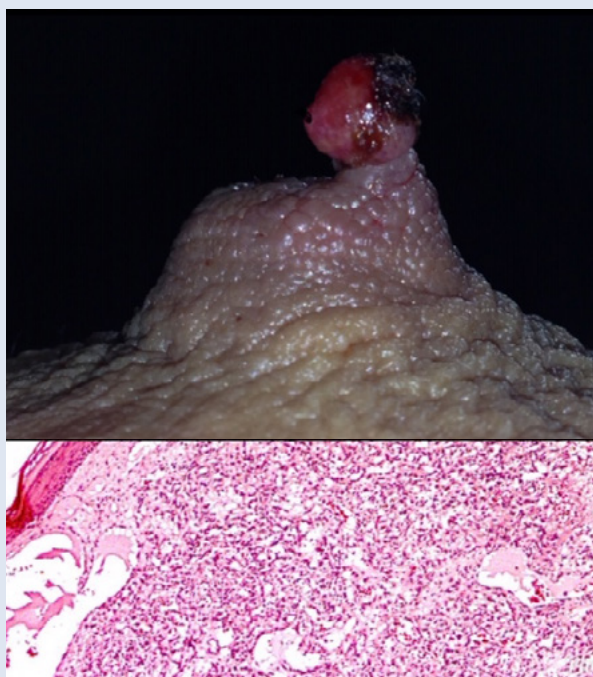


IMAGES IN DERMATOLOGY

Pyogenic Granuloma

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A 32-year-old female patient presented with a clinical picture characterized by a 3-week erythematous, asymptomatic tumor on the right nipple, measuring approximately 8 mm in diameter.

Physical examination revealed a spherical, erythematous, excoriated tumor on the nipple. Histopathology exhibited a well-delimited proliferation of diffuse patterned small capillaries.

Pyogenic granuloma, also known as lobular capillary hemangioma, is one of the most common vascular tumors among breastfed and children. It can affect adults as well, especially pregnant women. Pyogenic granulomas appear after a trauma or chronic irritation, developing granulation tissue as a form of repair mechanism.

This is characterized by the presence of a fast-growing papule or red and smooth solitary nodule, which varies in size from various millimeters to centimeters; and occasionally presents a scaly collarette. PG's most common locations are the cheeks and forehead. However, it can occur on any part of the body, including mucosal surfaces and areas of recurrent trauma. The base may be pedunculated or sessile. It often presents an eroded surface with posterior, profuse bleeding.

Pyogenic granuloma does not tend to regress spontaneously. However, shave biopsies and electrical cauterization are possible treatment options. Other treatments are excision, laser surgery and cryotherapy.

The choice of treatment for our patient was surgical excision, accompanied by histopathological examination which confirmed the initial clinical diagnosis

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