



IMAGES IN DERMATOLOGY

Asymptomatic Hyperpigmented Lesions on the Areolas of a Pediatric Patient[☆]



Lesiones hiperpigmentadas y asintomáticas en aréolas de un paciente pediátrico

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Figure 1

An overweight 15-year-old boy with no other personal or family history of interest was referred from endocrinology outpatients for the evaluation of asymptomatic hyperpigmented lesions that had arisen on both areolas 5 months earlier. Physical examination revealed multiple flat hyperpigmented papules with a velvety verrucous surface on both areolas and that coalesced into larger plaques. The lesions were not tender. Additionally, the patient presented gynecomastia and mild lateral cervical hyperpigmentation, with no

involvement of other skin folds. Based on a detailed medical history and physical examination, we made a clinical diagnosis of bilateral nevoid hyperkeratosis of the nipple and/or areola (HNA) (Figure 1). HNA is a rare benign dermatosis of unknown etiology, although possible triggers include hormonal changes and insulin-resistance. Eighty percent of reported cases have been in women in their second or third decades of life, and the condition has been associated with various dermatoses, including acanthosis nigricans, epidermal verrucous nevus, and seborrheic keratosis, and other systemic diseases, such as ichthyosis, Darier disease, and chronic eczema. In our patient, in view of the benign and asymptomatic nature of the condition, and with the patient's agreement, we decided to take a wait-and-see approach, recommending weight loss and a low carbohydrate diet.

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