

sub-cutaneous and not fixed to underlying tissues [Fig 1]. This was a recurrence of a lesion that had been removed by lamellar excision in the same site 2 years back. The recurrent mass was removed this time by pentagonal full thickness lid excision with re-construction by advancement eyelid flap. Histopathological examination showed tumor with variegated appearance. The epithelial component composed of round to oval cells with large nucleoli with scanty cytoplasm and the cells were arranged in nests and acinar pattern. The coating for epithelium of the glandular elements was two layered. The intervening stroma showed fibrosis and myxoid areas. No evidence of lacrimal gland tissue was noted in multiple sections [Fig. 2].

Chondroid syringoma is a tumor arising from the sweat glands which can be apocrine (found throughout the surface of lid) or eccrine (glands of Moll in association with eyelash follicles) with a mean age of 50 years (22-73 years).^[1] Ozdal *et al.* in a study of 228 benign ocular adnexal tumors reported apocrine/eccrine hydrocystoma as very common and no case of Chondroid Syringoma was found in that series.^[3] Tyagi *et al.* in their study of 207 eyelid tumors had one case of Chondroid syringoma with an incidence of 0.48% in their series.^[4]



Figure 1: 1.5 cm × 1.5 cm mass involving the right upper lid

Chondroid syringoma: A rare lid tumor

Sir,
Chondroid syringoma is a rare primary skin tumor (0.01% to 0.1% of primary skin tumors).^[1] Though its very common occurrence is in head and the neck region, involvement of eyelids is extremely rare. In English literature we found 27 reported cases of chondroid syringoma involving ocular adnexa.^[1,2] We are reporting a case of recurrent chondroid syringoma of upper eyelid in a young male.

A 27-year-old male present with a slow growing painless mass in right upper lid since past 6 months duration. The mass was 1.5 cm × 1.5 cm firm, non-tender,

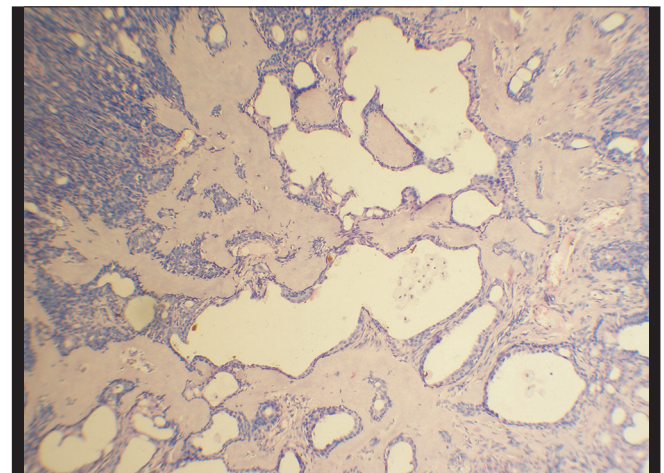


Figure 2: Histopathology showing glandular elements with two layered lining epithelium in myxoid matrix

This tumor was first described by Billroth^[5] and the term chondroid syringoma was coined by Hirsh and Helwig to characterize the origin from sweat glands^[6] though the appearance is like pleomorphic adenoma of lacrimal gland. A proper histopathological examination to rule out presence of normal lacrimal gland tissue external to the tumor capsule helps to differentiate chondroid syringoma.^[1] The case being reported had tubular and cystic branching lumina with 2 layered epithelium showing an apocrine origin.^[1]

Chondroid syringoma is a benign tumor but incomplete excision can undergo malignant transformation.^[1] Hence complete excision is advised.

This case is being reported for its rarity (this is the 28th case in literature involving ocular adnexa), its occurrence in a young patient and the need to keep this rare entity as a differential diagnosis of eyelid tumors.

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