

Keloid of ear lobes: nature's ear rings

A Agarwal, S Gupta, S Gupta, G Guha, A Agarwal

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Abstract

Keloid is an aberration during healing of a wound. It usually results from a cutaneous injury. We hereby report a case that developed keloid in both her earlobes after ear pricking. They developed to such an extent that it looked like a natural earring.

INTRODUCTION

The term keloid is derived from the Greek word “chele,” meaning “crab's claw.” Keloids are benign, hard, persistent fibrous proliferations that develop in predisposed persons at sites of cutaneous injury. These deposits of collagen expand beyond the original size and shape of the wound, frequently invading the surrounding skin in a claw-like fashion

CASE HISTORY

A 13 year old female presented with history of pricking of earlobes 2 month back. She had complains of a mass hanging from both the ear lobes.

On examination she had two keloids on left ear and one on right ear lobe (photo1,). They were excised, and pressure applied by custom made earrings having spring.

Post operatively the patient had no recurrence in her 1 year of followup.

Figure 1

Photo 1 large keloid of both the ear lobes masquerading as ear rings



DISCUSSION

Keloids are an aberration in healing process. Their manifestations can be purely cosmetic or they may be troublesome to the patient causing constant itching. They frequently harbor infections.

They are closely related to hypertrophic scar. Differentiation between two is difficult.

The incidence of keloids in dark-skinned persons is estimated to be 15 to 20 times that of light-skinned persons. An abnormality in melanocytic-stimulating hormone may be responsible. Keloid growth is increased during puberty and pregnancy, when melanocytic-stimulating hormone production is increased. Infection also may promote the development of keloids at sites of skin injury. A familial predisposition is apparent, especially among patients with multiple lesions. However, the exact cause of keloids is

unknown.

In asymptomatic cases it can be left alone.

There are several treatment options hypothesized but none led to satisfactory results. Surgery alone or in combination with intra lesional steroid and pressure is said to yield better cosmetic results. Radiotherapy, electrodesiccation, cryotherapy, massage have also been tried.

Despite all these modalities, keloid is known for frequent recurrences.

CORRESPONDENCE TO

Dr. Akhilesh Kr. Agarwal C/O Mr. Ratan Pd. Agarwal Shree Market Station Road Gonda – 271002 UP India Ph: 05262222931 +919883291911 Email: akhil2u@rediffmail.com akhil_g_2002@yahoo.com

References

Author Information

Akhilesh Kr. Agarwal, MBBS,MS

Senior resident, Dept. of Plastic surgery, Calcutta Medical College

Souradip Gupta, MBBS

Junior resident, Dept. of Plastic surgery, Calcutta Medical College

Sandipan Gupta, MBBS MS MCh

Prof. & Head Of Department, Dept. of Plastic surgery, Calcutta Medical College

Gautam Guha, MBBS MS MCh

Assistant Prof., Dept. of Plastic surgery, Calcutta Medical College

Anshu Agarwal

MBBS GSVM Medical college