INTRODUCTION

- Chondroid syringoma, also known as benign mixed tumour of skin, is a relatively rare cutaneous adnexal tumour of eccrine and apocrine origin which is commonly located at head and neck region.
- It presents as an asymptomatic mass.
- The present case reported is of chondroid syringoma, at a relatively rarer location of leg, which was primarily diagnosed by FNAC and later confirmed by histology.

CASE REPORT

- A 35 year old male presented with a slow growing mass in lateral aspect of lower one third of right leg for 3 months duration.
- The swelling was 5.5×4 cm, nodular, firm, mobile and attached to overlying skin. No ulceration seen.
- Clinically it was thought to be a benign mesenchymal lesion and sent for FNAC.
- Microscopic examination showed cellular smear with clusters and sheets of epithelial cells with round nuclei and moderate amount of cytoplasm embedded in a chondromyxoid stromal material.
- Based on these findings a cytological diagnosis of chondroid syringoma was offered.
- The mass was resected and sent to the Pathology department.
- The histopathological features were of chondroid syringoma.

DISCUSSION

- The incidence of chondroid syringoma is low 0.01-0.098 percent
- Chondroid syringoma usually presents in head and neck region may also occur in rarer locations like orbit, hand, forearm, foot, scrotum etc.
- Chondroid syringoma is often misdiagnosed clinically with other lesions with nodularity like dermoid cyst, neurofibroma, dermatofibroma, pilomatrixoma, cutaneous histiocytoma etc.
- FNAC may suggest a diagnosis of chondroid syringoma on the basis of thick mucoid aspirates showing distinct biphasic cell population of epithelial and myoepithelial cells in a fibrillar chondro-myxoid stroma.
- Fine Needle Aspiration Cytology is also useful to determine benign and malignant chondroid syringoma

CONCLUSION

- The present case emphasizes the cytodiagnosis of chondroid syringoma and its rare location (right leg) for optimal patient management

REFERENCES