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Visual Treats in Dermatology

# Infiltrated and nodular pinna – A distinctive feature of lepromatous leprosy

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A 38-year-old male patient presented with thickening, infiltration, and nodularity of the ear lobes [Figure 1a] bilaterally for 1 year. In addition, he had diffuse infiltration of face, with madarosis of eyebrows [Figure 1b]. The patient also had bilateral thickening of greater auricular and ulnar nerves. Slit skin smear from ear lobule was highly positive (bacteriological index = 6+). Based on the characteristic history, clinical features, and slit skin smear, we made a diagnosis of lepromatous leprosy with ear involvement. Mycobacterium leprae preferentially affects the cooler body sites such as pinna and lobule. External ear manifestations of Hansen's disease include infiltration, nodule formation, ulceration with "nibbled" or "rat-bitten" defect, megalobule, and auricular chondritis. Infiltrated papular and nodular lesions in the pinna are a distinctive feature of lepromatous leprosy. However, this presentation can also be seen in trauma/hematoma, lupus pernio, lupus vulgaris, multicentric reticulohistiocytosis, lymphocytoma cutis, Rosai-Dorfman disease, relapsing polychondritis, and auricular pseudocyst. Since cases with isolated pinna involvement have



Figure 1: (a) Involvement of the pinna in the form of infiltration, nodularity, and thickening. (b) Diffuse infiltration of face with bilateral madarosis of eyebrows.

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been reported,[1] Hansen's disease should be considered in patients presenting with infiltrated, nodular lesions on pinna.

### Declaration of patient consent

Patient's consent is not needed as patient's identity is neither disclosed nor compromised.

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#### **Conflicts of interest**

There are no conflicts of interest.

#### **REFERENCE**

Palaniappan V, Kaliaperumal K. Cauliflower ear in lepromatous leprosy. Am J Trop Med Hyg 2021;105:1444-5.

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