Introduction: Glomus tumors are rare benign lesions that are most often found on the tips of the fingers; they account for 1.0-4.5% of neoplasias on the hand. Subungual glomus tumors occur more frequently in women in their 30s and 50s.

Objective: This study evaluated glomus tumor patients’ epidemiological profiles, their satisfaction with the treatment and the rate of recurrence due to incomplete removal.

Method: The records of patients that were treated for glomus tumors at a dermatology clinic between 1992 and 2011 were evaluated regarding gender, age, profession, affected area of the body, satisfaction with the treatment and possible recurrence.

Results: The patients (n = 8, average 63 years) were older than those usually described in the literature. The most frequently described profession was that of housewife. All patients were satisfied with the aesthetic results of the treatment. There was a total improvement of the pain in three patients, while patients with a partial improvement in pain experienced a recurrence. The recurrence rate due to incomplete removal was 50%.

Conclusion: The surgery’s effectiveness can be measured by the improvement of the pain; persistence of pain can indicate recurrence.

Keywords: therapeutics; glomus tumor; nails.

Resumo: O tumor glômico é lesão benigna rara que ocorre mais comumente em falanges distais e representa de 1% a 4,5% das neoplasias da mão. O tipo subungueal é mais frequente em mulheres nas terceira e quinta décadas da vida.

Objetivo: Este trabalho objetivou avaliar o perfil epidemiológico de pacientes com tumor glômico, sua satisfação em relação ao tratamento, e a recidiva por retirada incompleta.

Método: Estudaram-se os prontuários de oito pacientes com diagnóstico de tumor glômico tratados em serviço de dermatologia de 1992 a 2011 avaliando-se sexo, idade, profissão, região acometida, satisfação do paciente em relação ao tratamento e se houve recidiva.

Resultados: A média de idade dos casos foi de 63 anos, superior à faixa etária descrita pela literatura. A profissão mais relacionada foi "prendas domésticas". Todos os pacientes ficaram satisfeitos com o tratamento do ponto de vista estético. A melhora da dor foi plena em três dos seis pacientes que retornaram para avaliação. Naqueles em que a melhora não foi total, houve recidiva. A taxa de recidiva por retirada incompleta foi de 50%.

Conclusão: Conclui-se a persistência da dor como indicadora de recidiva e percebe-se a efetividade da cirurgia na melhora da dor.

Palavras-chave: terapêutica; tumor glômico; unhas.
INTRODUCTION

A glomus tumour (GT) is a rare, benign lesion that are most often found on the tips of the fingers; they account for 1.0-4.5% of neoplasias on the hand. They are characterized by intense and debilitating pain, and pulsing sensitivity to pressure and temperature. Diagnosis can be based on a physical examination; a Love test is used, which gauges the pain of putting pressure on the tumor. Complementary examinations such as x-ray, ultrasound and magnetic resonance can be requested; the latter is the most sensitive. The treatment of choice is surgical excision, which can have unaesthetic results. This study examined the profile of patients treated at a Dermatology clinic who were diagnosed with GT, and evaluated the treatment, the aesthetic result, the improvement in pain levels and the recurrence due to incomplete removal.

METHOD

This study evaluated eight GT cases treated at the Dermatology clinic of the Instituto Lauro Souza Lima, in Bauru (SP), Brazil, between 1992 and 2011. It was carried out with the approval of the institution's Ethics Committee. The patients' medical records were analyzed to determine gender, age, profession, affected body area, elapsed time until diagnosis, comorbidities, complementary examinations and pain characteristics. The patients were then asked to evaluate their satisfaction with the treatment (improvement of pain and post-operative aesthetic outcome) and were assessed for possible recurrences due to incomplete removal.

RESULTS

The average age of the patients was 63 (range 36-77), with six women and two men. Six of the eight patients presented lesions in the fingers, one in the left big toe and one in the right smallest toe (Table 1). Of the seven patients with lesions on their fingers and toes, five had lesions under the nail (subungual region) and two had them around the nail (periungual region) (Table 1 and Figure 1). The most frequent comorbidities were diabetes mellitus and arterial hypertension (Table 1). Four of the patients described their profession as housewives, two had administrative duties and one worked as an ovenman. All patients presented intense pulsing pain that worsened with touch, and two described a worsening of the pain with exposure to low temperatures. The time between the start of the pain and the diagnosis ranged from one to 35 years, with an average of 13.5 years. X-rays that demonstrated typical alterations were requested for only two of the seven patients (one in the fourth right finger and another in the left big toe). These typical alterations

<table>
<thead>
<tr>
<th>Name</th>
<th>Age</th>
<th>Gender</th>
<th>Profession</th>
<th>Development duration</th>
<th>Location</th>
<th>Year</th>
<th>Comorbidities</th>
<th>Pain improvement</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patient 1</td>
<td>65</td>
<td>F</td>
<td>Civil servant</td>
<td>5 years</td>
<td>3rd left finger</td>
<td>2003</td>
<td>None</td>
<td>60%</td>
</tr>
<tr>
<td>Patient 2</td>
<td>75</td>
<td>F</td>
<td>Housework</td>
<td>35 years</td>
<td>Left big toe (subungual)</td>
<td>2004</td>
<td>SAH, DM</td>
<td>100%</td>
</tr>
<tr>
<td>Patient 3</td>
<td>65</td>
<td>F</td>
<td>Tradesman</td>
<td>5 years</td>
<td>Right thumb</td>
<td>2004</td>
<td>None</td>
<td>Not evaluated</td>
</tr>
<tr>
<td>Patient 4</td>
<td>58</td>
<td>M</td>
<td>Legal secretary</td>
<td>6 years</td>
<td>Right thumb (subungual)</td>
<td>2005</td>
<td>Hypoacusis</td>
<td>70%</td>
</tr>
<tr>
<td>Patient 5</td>
<td>68</td>
<td>F</td>
<td>Housework</td>
<td>30 years</td>
<td>4th right finger (nail bed)</td>
<td>2008</td>
<td>SAH</td>
<td>100%</td>
</tr>
<tr>
<td>Patient 6</td>
<td>77</td>
<td>F</td>
<td>Housework</td>
<td>1 years</td>
<td>4th right finger (perigual)</td>
<td>2010</td>
<td>SAH, DM</td>
<td>60%</td>
</tr>
<tr>
<td>Patient 7</td>
<td>62</td>
<td>F</td>
<td>Housework</td>
<td>20 years</td>
<td>4th right finger (subungual)</td>
<td>2011</td>
<td>None</td>
<td>100%</td>
</tr>
<tr>
<td>Patient 8</td>
<td>36</td>
<td>M</td>
<td>Ovenman</td>
<td>4 years</td>
<td>Right inferior limb</td>
<td>1992</td>
<td>Saturnism</td>
<td>Not evaluated</td>
</tr>
</tbody>
</table>

Table 1: Profiles of glomus tumor patients

Table with a profile of patients with glomus tumor

Figure 1 - A: Periungual tumor: pre-operative (mild local erythema); B: Tumor excision; C: Healing without sequel in the post-operative period (Patient 6)
were: depressions in the distal phalange with the thinning of the cortical and the medullar (Figure 2A). Only one patient underwent ultrasonography, which revealed a 1.2 cm nodular lesion (Figure 2B). All patients had surgical treatment (Figure 3).

Of the eight patients invited for a post-operative evaluation later the same year, six returned to the clinic. The alterations found in the post-operative examination were: longitudinal streak (one case) (Figure 4); pterygium (two cases) (Figures 5 and 6); and distal ingrown nail, which spontaneously improved (one case) (Figure 7). All patients described an improvement of the pain; three patients reported a 100% improvement. Nevertheless, of the six re-evaluated patients, three (50%) described a resurgence of the pain. These patients had additional surgeries, and the presence of the tumor – which had probably not been completely removed – was verified again. Six patients reported they were satisfied with the aesthetic outcome.
DISCUSSION

In the series of cases studied, there was a prevalence of female patients (75%). The GT more frequently affected the chirodactyls; these findings align with previously published data. The average age in the studied cases was 63, higher than the age group described by other authors. The most frequent profession was housework, in line with the literature, which describes a correlation with mechanical traumas linked to housework activities.

Complementary examinations were carried out in only three cases, with diagnostic hypotheses based on clinical findings (Figure 8) and positive Love tests. The GT diagnosis was confir-
Figure 8 - Physical examination: dermoscopy of the subungual lesion (Patient 7)

Figure 9 - Histopathology - HE: glomus cells nests (smaller and larger magnification)

CONCLUSION

Surgery, as the only treatment option, is usually well accepted and yields satisfactory results. Nevertheless, it is important to explain to patients that the aesthetic results might not be highly satisfactory. The persistence of the pain usually signifies a recurrence of the lesion and the need for further treatment.

REFERENCES
