

A Persistent Pimple

Simon Lee MD

Andy, a 55-year-old male, complains of an annoying, persistent lesion on the left forehead of many years duration. He is quite frustrated because there is an intermittent foul smelling, pustular discharge from the site despite numerous attempts at self extraction. He has a history of acne. Examination reveals a solitary pore like opening on the skin. There is no surrounding inflammation, nor induration.

What is your diagnosis?

- a. Pigmented basal cell carcinoma
- b. Dilated pore of Weiner
- c. Pilar cyst
- d. Lipoma

Answer

Dilated pore of Weiner (answer b) is considered to be a tumour of the pilosebaceous unit. It has been postulated that chronic obstruction or inflammation lead to cellular proliferation of the follicular infundibulum.¹ Pathology reveals a dilated hair follicle opening and enlarged cavity filled with keratotic material. This poral opening may extend into subcutaneous tissue. Chronic self manipulation may lead to acute bacterial infection and scarring. Surgical excision of the entire lesion is the treatment of choice since there is often recurrence following other



Figure 1: a persistent pimple

attempts such as electrocautery and laser ablation. Prognosis is excellent and there has been no reported fatality with this condition.

This is a pathological rather than a clinical entity. It is an area of expanded follicular infundibulum with a dilated poral opening extending down to the subcutaneous fat.

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Reference

1. Weiner L. The Dilated Pore. J Invest Dermatol 1954;23:181-8

Simon Lee, MD is a Dermatologist practicing in Richmond Hill, Ontario