"What's this mark on my eyelid?"

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A n overweight 58-year-old male incidentally mentions during his visit to the dermatologist the yellow plaque on his eyelid. He has only the one asymptomatic lesion. He is wondering what it is and how to treat it.

1. What is the most likely diagnosis?

- a. Sarcoidosis
- b. Epidermoid cyst
- c. Milia
- d. Xanthelasma
- e. Necrobiosis lipoidica

2. What percentage of affected patients have elevated lipid levels?

- a. 25%
- b. 33%
- c. 50%
- d. 66%
- e. 75%

3. How could you manage this lesion:

- a. Trichloroacetic acid
- b. Cryosurgery
- c. Excision
- d. Advise dietary restrictions with or without pharmacologic reduction of elevated lipid levels
- e. all of the above

Xanthelasma are asymptomatic, soft, yellow plaques occurring most commonly on the medial canthus of the eyelids. They are often symmetrical and commonly involve all four eyelids. These lesions slowly progress and are



Figure 1. Yellow plaque on eyelid.

permanent. Half of these lesions are associated with elevated blood lipid levels and so testing of total cholesterol, LDL-C and HDL-C levels along with triglycerides is worthwhile. These lesions are quite uncommon and have no malignant potential. It most commonly onsets in individuals in their 40s and 50s. Most patients complain about the cosmetic appearance.

Reducing serum lipid levels often shows modest improvement, if any, in the appearance of xanthelasma. Chemical cauterization with trichloroacetic acid, electrodesiccation, cryotherapy, CO₂ laser ablation, and surgical excision are the typical treatment modalities.



Answers: 1-d; 2-c; 3-e

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