



A Scalp Plaque

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A 14-year-old male presents with a slowly enlarging brown-orange plaque on his scalp. It has thickened up in the past few years and the diameter is slightly increased. It is asymptomatic.

1. What is the most likely diagnosis?

- Cutis aplasia
- Juvenile xanthogranuloma
- Hemangioma of infancy
- Dysplastic nevus
- Nevus sebaceous

2. What lesion can develop within this lesion?

- Syringocystadenoma papilliferum
- Basal cell carcinoma
- Keratoacanthoma
- Trichoblastoma
- All of the above

3. How could you manage this lesion?

- Annual check-up and monitoring
- Excision
- a and b
- Topical steroid
- Oral antifungal


The condition that is present is nevus sebaceous. Approximately 0.3% of newborns are affected by this hamartomatous benign tumour. It is equally prevalent in men and women, as well as in different races. It is usually solitary and hairless, with the scalp most often affected.



Figure 1. A slowly enlarging brown-orange plaque on the scalp.

While this lesion remains benign in most cases, a variety of benign and malignant tumours have been reported within a nevus sebaceous, including:

- basal cell carcinoma,
- trichoblastoma,
- syringocystadenoma papilliferum,
- sebaceous cell carcinoma,
- keratoacanthoma and
- apocrine cystadenoma.

Management involves either prophylactic excision or the wait-and-see approach. This is based on a discussion with patients about the cosmetic effects of the lesion, the small risk of neoplastic transformation, as well as size and location of the lesion. Any growth within a nevus sebaceous requires a biopsy. 

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

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