

Pigmented nevus of the external auditory canal

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摘要

Abstract

ObjectiveTo present the clinical experience during an 18-year period of a series of 11 cases of pigmented nevus of the external auditory canal (EAC).

Study design and settingRetrospective medical review of 11 consecutive patients with lesions seen in 2 departments of otolaryngology in Taiwan.

Results12 pigmented nevi, 2 to 12 mm (average, 6.4 mm) in diameter, were excised under otomicroscopy, and the EAC was packed with a temporary Penrose stent. One large lesion developed a postobstructive external auditory canal cholesteatoma (EACC).

Histopathologic examination revealed 11 intradermal nevi and 1 compound nevus. There have been no recurrences or stenoses of EACs after 3 months to 17 years (average, 6 years) of follow-up.

ConclusionIf a pigmented nevus causes symptoms, especially when it is large enough to obstruct the lumen of the EAC and has the possibility of developing into an EACC, it should be excised.