

## “What’s this bump on my chest?”

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A 16-year-old Japanese male presents with a pruritic indurated nodule on his chest, several weeks after having an epidermoid cyst excised. On history, he reports other family members having had similar problems. He is otherwise healthy and on no medications.

### What is your diagnosis?

Keloids are a dermal hyperproliferative variation of normal wound healing and occur most commonly during the healing of a deep skin wound, particularly on the upper trunk. Keloids differ from hypertrophic scars by enlarging well beyond the original scar site. Along with the cosmetic appearance, they can be pruritic or painful. Black and Asian persons are more likely to develop keloids. The average age at onset is 15 to 30 years.

Keloid scars are best prevented since there is no ideal treatment. Silicone gel sheets and occlusive dressings have been used with only modest success in the treatment of keloids. Compression dressings (especially earlobe pressure earrings) are variably effective in their treatment, but worth a try.

The most common pharmacological treatment is intralesional steroids. Depending on the size, location, elevation and firmness of the keloid, various concentrations (5 mg/mL to 40 mg/mL) of triamcinolone acetonide are injected every six weeks with a 25 to 27 gauge needle until the scar flattens and discomfort is controlled. Surgical excision combined with steroid injection can improve the therapeutic response. Newer agents such as imiquimod have



Figure 1. Pruritic indurated nodule on chest of young male.

also shown promise after excision in preventing keloid recurrence. For optimal results, excisional therapy should be followed by either intrascar cortisone injections, imiquimod and/or pressure therapy.

Cryotherapy using liquid nitrogen for 10 to 30 seconds (one to three freeze cycles) repeated every month has been beneficial and can be combined with intralesional steroids for enhanced efficacy. Intralesional Bleomycin or 5-fluorouracil have both shown benefit. Various lasers have been used with quite variable results and should be left to those with experience using them on keloids.

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