

**CASE REPORT**

## **Cornu Cutaneum on the Penis-A Case Report**

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**Abstract**

A 60-years-old male presented with a cornu cutaneum (cutaneous horn) on the penis. Histopathology showed a well differentiated squamous cell carcinoma. Majority of the lesions at the base of the keratin mound are benign. The incidence of malignancy increases in cornu cutaneum of the penis with squamous cell carcinoma being the most common type.

**Key Words**

Cornu Cutaneum, Penis, Squamous Cell Carcinoma

**Introduction**

Cornu cutaneum (cutaneous horn) is the traditional picturesque term for a protruding skin lesion largely composed of keratin and resembling an animal horn but lacks a bony core(1,2). These are found mostly on sun exposed skin and very rarely on penis (3).

**Case Report**

A 60-year-old male presented with a hard projection on the penis of nine months duration to our institution. He had no pain, itching or discharge. No associated lymphadenopathy was observed. Partial penectomy was done and specimen was sent for histopathology.

**Pathological findings**

Gross examination revealed two horny projections on the prepuce, the larger one measuring 3.5x2.5 cm and the smaller measures 1.4x1cm (*Fig 1*). Histopathology revealed hyperkeratosis, acanthosis and papillomatosis. Clusters of malignant squamous cells were seen infiltrating

the stroma and at places forming keratin pearls. Mitotic figures were seen. Stroma showed intense inflammatory response. Histopathological diagnosis of well differentiated squamous cell carcinoma was made (*Fig 2*).

**Discussion**

Cornu cutaneum is a dense hyperkeratotic conical projection of skin arising from an unusual cohesiveness of keratinized material. Size may vary from few millimeters to centimeter (1, 2). Histologically it consists of concentric layers of cornified epithelial cells.

The first case of cornu cutaneum was described in 1854 (4). The peak occurrence of cutaneous horn is in persons aged 60 years to mid 70s. The distribution of cutaneous horn is in sun-exposed areas particularly the face, pinna, nose, forearms and dorsal hands (5, 6). Cutaneous horn occurs only rarely on the penis (7). These

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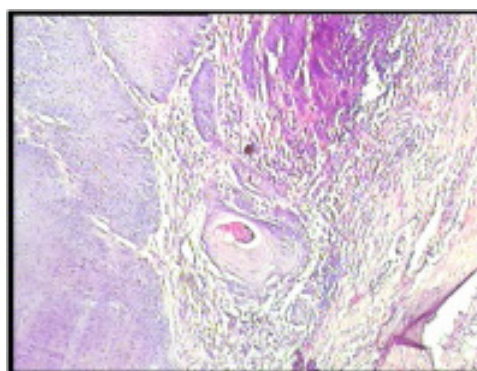


**Fig. 1 Shows Cutaneous Horn of the Penis**

horns can be derived from a variety of epidermal lesions, both benign and malignant. Various lesions seen at the base of a cornu cutaneum include actinic keratosis, verruca, keratoacanthoma, Bowen's disease, seborrheic keratosis, inverted follicular keratosis, squamous cell carcinoma, basal cell carcinoma and Paget's disease of the female breast (8). The lesion at the base of the keratin mound is benign in the majority of cases. Malignancy is present in upto 20 % of cases, with squamous cell carcinoma being the most common type. The incidence of carcinoma increases to 33% when the cutaneous horn is present on the penis (9, 10). Therefore surgical extirpation with histological examination is more important than the curiosity surrounding these lesions.

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**Fig. 2 Clusters of Malignant Squamous Cells, with Keratin Pearl Infiltrating the Stroma and Intense Inflammation in the Stroma (Hematoxylin and eosin, 100x)**

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