



HIDROCYSTOMA

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Hidrocyctomas, also known as cystadenomas, sudoriferous cysts, and Moll's gland cysts, are benign cystic tumors that are derived from either the eccrine or apocrine sweat gland. They tend to grow slowly and usually occur on the face or scalp, commonly affecting the eyelid. They affect both males and females, are more common in adults, and are usually asymptomatic. Furthermore, apocrine hidrocyctomas are not affected by temperature whereas eccrine hidrocyctomas can grow in size with heat exposure and grow smaller in cooler temperatures.

The exact cause of the hidrocyctoma is unknown but it is hypothesized that the eccrine hidrocyctoma is due to the obstruction of the eccrine sweat gland which causes the retention of secretions and the appearance of a dilated cystic structure. The apocrine hidrocyctoma is believed to be an adenoma of the coil structure of the apocrine sweat gland. It is important to understand the two different types of sweat glands to distinguish between apocrine and eccrine hidrocyctomas. Apocrine sweat glands are found only on certain areas of the body such as the eyelids, armpits, areolae, external ear, and the genital region. The ductal openings of the apocrine sweat gland are also more closely associated to the eyelashes compared to the eccrine sweat glands. Eccrine sweat glands are found distributed throughout the whole body.

On physical examination, apocrine hidrocyctomas are usually solitary, dome-shaped papules or nodules that range from flesh-colored to gray or blue. They range from a few millimeters to 1.5 cm and may involve the eyelid margin. In contrast, eccrine hidrocyctomas are bluish or translucent-appearing papules that are usually located on the medial or lateral aspect of the eyelid that can be either solitary or multiple. They do not involve the eyelid margin but may appear close to this margin. They range from 1 mm to 5 mm in size.

Although hidrocyctomas are benign lesions, a **biopsy** may be performed to make an accurate diagnosis to rule out other malignant tumors of the eye. Multiple hidrocyctomas of the eyelid may also be associated with Schöpf-Schulz-Passarge syndrome.

Some patients may be uncomfortable with the appearance of hidrocyctomas and may seek treatment for cosmetic purposes. These lesions may be removed by simple excision, cauterization, or with **lasers** such as the CO2 laser. Flattening of the lesions with the use of botulinum toxin A injections have also been reported.

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