Verruciform xanthoma of the esophagus: an uncommon entity in an unusual site

Fig. 1 Esophagogastroscopy showing a small, elevated, granular/verruoid pink-yellowish lesion, 3 mm in diameter, in the mucosa of the upper third of the esophagus.

A 49-year-old man was admitted for medical examination because of epigastric discomfort. Esophagogastroscopy revealed a small, elevated, verrucoid pink-yellowish mucosal lesion, 3 mm in diameter, in the upper third of the esophagus (● Fig. 1). Low power histological examination revealed an exophytic lesion resembling a squamous papilloma, with the typical papillomatosis, acanthosis, and hyperparaker-

atosis of the esophageal squamous epithelium (● Fig. 2a).

At higher magnification, neutrophilic intraepithelial exocytosis was observed, and the subepithelial connective tissue appeared infiltrated by clear cells with foamy cytoplasm and small nuclei with no atypia (● Fig. 2b,c). At immunohistochemistry, the foamy cells were negative for cytokeratins, s-100 protein, and CD1a, while CD68 was strongly positive (● Fig. 2d), indicating the histiocytic nature of the cells. The histological and immunohistochemical features allowed making a diagnosis of verruciform xanthoma of the esophagus.

Verruciform xanthoma is a lesion characteristically described in the oral cavity and genital skin [1]. It is usually solitary, but cases of multifocal lesions have been reported [1]. The main histological feature is the presence of foamy histiocytes in the subepithelial stroma of a squamous epithelium displaying papillomatosis, acanthosis, and hyperkeratosis, as observed in papillomatous/verrucous lesions. Intraepithelial neutrophilic infiltration is an-

other hallmark. The etiology is still unknown, most cases being unrelated to a viral infection. The presence of human papilloma virus in the epithelial cells has been demonstrated in only two reported lesions in the oral mucosa [2] and scrotum [3]. To the best of our knowledge, our case represents the second description in the English literature of verruciform xanthoma in the esophagus [4].

Competing interests: None

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Fig. 2 a Low power histological section showing papillomatosis, acanthosis, and hyperparakeratosis of the squamous epithelium, as usually seen in squamous papilloma (hematoxylin and eosin, original magnification $\times 40$). b, c At higher magnification, the subepithelial connective tissue appears infiltrated by clear cells with foamy cytoplasm and small nuclei with no atypia (hematoxylin and eosin, original magnification: b $\times 200$; c $\times 400$). d There is diffuse and strong positivity for CD68 on immunostaining (original magnification $\times 400$).