

# An unusual case of molluscum contagiosum of nipple-areola complex in a young adult: case report

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## Introduction

Molluscum contagiosum (MC) is a self-limited, benign skin infection caused by a double-stranded DNA virus belonging to the poxvirus family. It is most commonly observed in children and sexually active adults. In children, MC lesions typically appear on the face, trunk, and extremities, while in young adults, the virus is often transmitted sexually, causing lesions on the genital area. MC lesions are characterized by dome-shaped papules with central umbilication. MC affecting the nipple-areola complex (NAC) is an extremely rare presentation, with only six previously reported cases involving women<sup>1</sup>. Despite its benign nature, treatment of MC remains controversial. Lesions typically resolve spontaneously within six to nine months, but due to the contagious nature of the virus, many clinicians opt for intervention. Available treatments include topical agents such as cantharidin, cidofovir, cimetidine, imiquimod, salicylic acid, or retinoic acid, as well as physical methods such as cryotherapy, curettage, or surgical excision<sup>2</sup>. This report presents a case of MC of the NAC in a sexually active young adult female.

Figure 1: molluscum contagiosum of nipple-areola complex



**Case presentation:** A 28-year-old female presented to the clinic with a three-month history of a painless swelling on her right nipple-areola area, which had been gradually increasing in size. She reported no significant medical history or recent illness but indicated that she was sexually active. A physical examination was conducted, and an ultrasound was performed to assess the lesion. The lesion was subsequently excised and sent for histopathological examination. On physical examination, a 1x1 cm flesh-colored, well-defined, round swelling was

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noted above the right nipple, with no palpable axillary lymph nodes (Figure 1). Ultrasound imaging revealed an ovoid, isoechoic, and circumscribed mass within the right nipple. Histopathological examination of the excised lesion showed a cup-shaped lesion with inverted lobules of hyperplastic squamous epithelium extending into the dermis. Intracytoplasmic eosinophilic inclusion bodies, characteristic of molluscum contagiosum, were present. No atypical or malignant changes were observed, confirming the diagnosis of molluscum contagiosum.

**Discussion:** Molluscum contagiosum of the nipple-areola complex is a rare condition that may not always present with the typical morphology of MC lesions. Despite its rarity, MC should be included in the differential diagnosis of papular lesions of the NAC. Proper diagnosis and management, whether through observation or treatment, are essential in addressing this condition.

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**Consent:** Written informed consent for publication was obtained from the patient and held by the authors.

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