## Sebaceous gland carcinoma: a great masquerader

## Suppiah Khirutikkaa<sup>1,2</sup>, Say Ting Ooi<sup>1</sup>, Sok Lin Ng<sup>1</sup>, Ngoo Qi Zhe<sup>2</sup>

<sup>1</sup>Department of Ophthalmology, Hospital Taiping, Perak, Malaysia, <sup>2</sup>Department of Ophthalmology and Visual Science, School of Medical Sciences, Universiti Sains Malaysia, Kubang Kerian, Kelantan, Malaysia

## **ABSTRACT**

Sebaceous gland carcinoma (SGC) is a rare eyelid malignancy. Eyelid swelling mimicking chalazion is the most common presentation which can be misdiagnosed leading to delay in diagnosis and treatment. Patient is 62-year-old woman with underlying hypertension and goitre presented to with right eye (RE) upper eyelid swelling past 1 year became harder in consistency was increasing in size. On examination, her visual acuity was 6/6 both eyes and normal intraocular pressure. Slit lamp examination of the RE upper eyelid revealed a  $1 \times 1$  cm hard, solitary centrally located lesion with few pouting punctums on the surface. The lesion had pearly telangiectatic vessels. The lesion extended through lid margin into palpebral conjunctiva. Otherwise, no ulceration and no loss of eyelashes. Left eye anterior segment and both eyes fundus was unremarkable. RE eyelid incision biopsy was done and histopathology report revealed features of SGC whereby tumour tissues arranged in nest and solid sheets with marked pleomorphism, vesicular nuclei with prominent nucleoli. Focal tumour clusters with central necrosis seen. No lymphovascular invasion seen. Patient was then subjected for RE excisional biopsy under frozen section followed by lid reconstruction. SGC is a great masquerader; therefore, higher clinical suspicion is needed for prompt diagnosis and management to prevent metastasis or recurrence related to advanced tumours.