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Case Report

Atypical Superficial Presentations and Locations of a Rare Entity: Fibrolipoma- A Report of Eight Cases

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Abstract

Fibrolipoma is a rare histological variant of lipoma, characterized by mature adipose tissue interspersed with dense fibrous connective tissue. We report eight cases of fibrolipomas in Moroccan patients with atypical locations. Clinically, fibrolipomas can mimic various lesions, posing a diagnostic challenge. Histopathological examination is essential to confirm the diagnosis. Given the rarity of this lesion, further case documentation is necessary to enhance awareness among healthcare professionals regarding its clinical and histopathological characteristics.

Keywords: fibrolipoma; histopathology; superficial presentations

Introduction:

Lipomas are benign mesenchymal neoplasms composed of mature adipocytes, usually surrounded by a thin fibrous capsule [1]. Fibrolipoma is a rare variant of lipoma, characterized by a mixture of adipose and fibrous connective tissue [2]. We report eight cases of fibrolipomas in Moroccan patients with atypical superficial locations.

Case Reports:

Case 1:

An 11-year-old Moroccan male, with no significant medical history, presented with a superficial subcutaneous swelling on the forearm, evolving over several months. Clinical examination revealed a roughly rounded mass, initially suggestive of an epidermoid cyst. Surgical excision was performed, and macroscopic examination revealed fragmented beige-yellowish tissue with a soft-to-firm consistency. Histological analysis showed a biphasic tumor proliferation (Figure 1), with adipose lobules separated by regular septa (Figure 2). The fibrous component consisted of regular fibroblasts interspersed with adipose lobules, without signs of malignancy (Figure 3). The postoperative course was uneventful, with no recurrence.

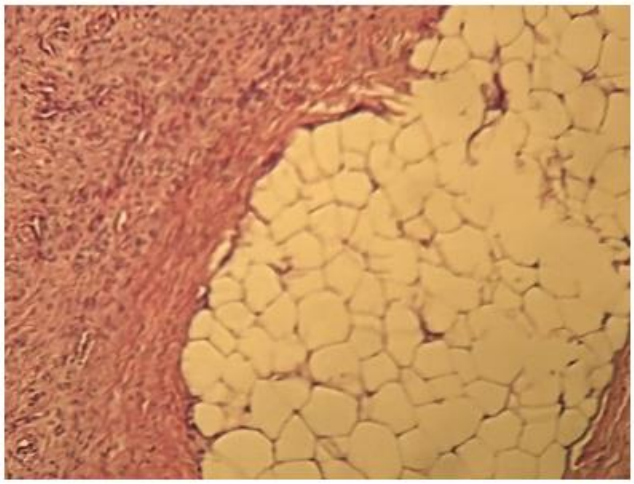

Figure 1: Biphasic tumor proliferation (H&E, x25).

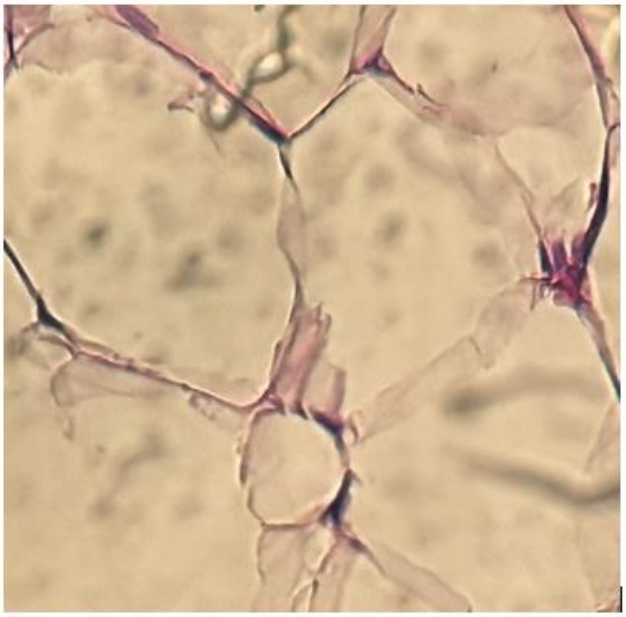

Figure 2: Adipose lobules (H&E, x25).

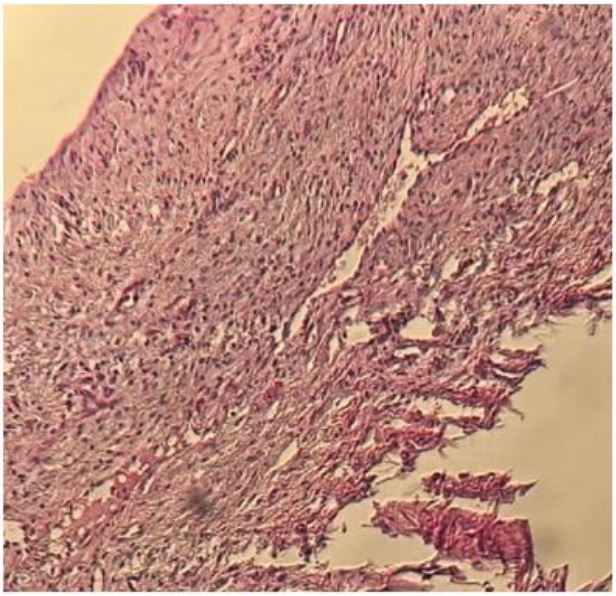

Figure 3: Fibrous component (H&E, x25).

Case 2:

A 42-year-old Moroccan male presented with a superficial subcutaneous swelling on the trunk, evolving for one year. Clinical examination revealed a well-defined, rounded mass. Macroscopic analysis after excision showed a 4 cm beige-yellowish fragment with a soft-to-firm consistency. Histopathological examination confirmed a biphasic tumor with adipose and fibrous components, without malignancy. The postoperative course was uncomplicated, and no recurrence was noted.

Case 3:

A 33-year-old Moroccan male presented with a superficial subcutaneous swelling on the back for four months. A well-circumscribed, rounded mass was noted on clinical examination. Surgical excision yielded a 4.5 cm beige-yellowish tissue fragment. Microscopic examination confirmed a fibrolipoma with adipose and fibrous components, without malignant features. Postoperative evolution was favorable, with no recurrence.

Case 4:

An 18-year-old Moroccan female presented with a three-month history of a superficial subcutaneous mass on the cheek. The mass was excised, and macroscopic examination showed a 0.6 cm beige-yellowish soft-to-firm fragment. Histopathological analysis revealed a fibrolipoma without signs of malignancy. The postoperative period was uneventful, with no recurrence.

Case 5:

A 27-year-old Moroccan male presented with a superficial subcutaneous mass on the arm, evolving for two years. Excision revealed a 6 cm beige-yellowish mass with a soft-to-firm consistency. Histological examination confirmed a fibrolipoma with adipose and fibrous proliferation. The postoperative course was uneventful, with no recurrence.

Case 6:

A 26-year-old Moroccan male presented with a superficial subcutaneous swelling on the forehead, evolving for one year. Surgical excision was performed, yielding a 1 cm beige-yellowish fragment. Histological analysis confirmed the diagnosis of fibrolipoma. The postoperative course was favorable, with no recurrence.

Case 7:

A 30-year-old Moroccan female presented with a superficial subcutaneous mass on the trunk for five months. The excised specimen measured 2 cm, with histological confirmation of a fibrolipoma. The postoperative course was uncomplicated, with no recurrence.

Case 8:

A 5-year-old Moroccan male presented with a one-year history of a superficial subcutaneous mass in the lumbar region. The excised specimen measured 4 cm, and histopathology confirmed a fibrolipoma. The postoperative period was uneventful, with no recurrence.

Discussion

According to the 2020 WHO classification [3], fibrolipoma is a rare microscopic variant of lipoma, characterized by mature adipose tissue interspersed with dense fibrous connective tissue [4]. Its exact etiology remains controversial, with endocrine, dysmetabolic, genetic, and traumatic factors being considered [5]. Clinically, fibrolipomas lack specific symptoms and may be asymptomatic, painful, functionally impairing, or aesthetically concerning. In rare cases, they can cause respiratory or esophageal obstruction [5,6,7,8]. Magnetic resonance imaging (MRI) is a valuable tool for diagnosing all lipoma variants. Despite their benign nature, fibrolipomas can pose surgical challenges depending on their location and size. Microscopically, fibrolipomas consist of benign adipocyte lobules resembling a meshwork, with broad bands of dense collagen. They are generally well-circumscribed and sometimes finely encapsulated, like classical lipomas [5]. The clinical differential diagnosis includes all benign or cystic neoplastic masses. Histologically, fibrolipomas must be distinguished from conventional lipomas and atypical lipomatous tumors, sometimes requiring fluorescence in situ hybridization (FISH) analysis for MDM2 amplification [2]. Multiple fibrolipomas should prompt consideration of genetic syndromes, as seen with classical lipomas in conditions such as neurofibromatosis, Gardner syndrome, encephalo-cranio-cutaneous lipomatosis, multiple familial lipomatosis, Proteus syndrome, Cowden syndrome, multiple hamartoma syndrome, and Dercum disease [6]. In such cases, oncogenetic consultation is recommended. Treatment is based on surgical excision, with low recurrence rates [9,10,11,12]. Malignant transformation is rare [13]. Fibrolipoma is a rare histological variant of lipoma that can present in atypical superficial locations. Given its non-specific clinical presentation, it may mimic other soft tissue masses, necessitating histopathological confirmation. While surgical excision remains the treatment of choice, recognizing this entity is crucial to avoiding misdiagnosis, especially in cases of multiple or large lesions.

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Conflicts of interest

None declared.

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Ethical Approval

ethics approval was not required for this study

Consent for Publication

"Written informed consent was obtained from the patients for publication of this case series and any accompanying images.

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