Crochordons are benign skin lesions which are frequently seen, often small and skin colored, and located anywhere on the body surface area despite mostly seen in the axillary and neck. Acrochordons are also known by names such as fibroepithelial polyp, skin tags, soft fibroma. In routine clinical cases, acrochordons are generally smaller than 5 millimeters. Although it is rare, the malignancy is observed in acrochordons. Here we present a 84-year-old female patient with a giant mass of 17x13 x 4 cm under the left arm and an about 2x3 cm diameter skin ulcer due to the weight of the mass. We would like to remind that such ulcerations should not be ignored for malignant transformation.

**Keywords:** Fibroma; skin; skin ulcer; traction

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**ABSTRACT** Acrochordons are benign skin lesions which are often seen in the neck and armpit. Acrochordons are also known by names such as fibroepithelial polyp, skin tags, soft fibroma. In routine clinical cases, acrochordons are generally smaller than 5 millimeters. Although it is rare, the malignancy is observed in acrochordons. Here we present a 84-year-old female patient with a giant mass of 17x13 x 4 cm under the left arm and an about 2x3 cm diameter skin ulcer due to the weight of the mass. We would like to remind that such ulcerations should not be ignored for malignant transformation.

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**ÖZET** Akrokordonlar, sıklıkla boyun ve koltuk altlarında görülen iyi huylu lezyonlardır. Akrokordonlar ayrıca fibroepitelyal polip, skin tag, yumuşak fibrom gibi isimlerle de bilinir. Klinik pratikte karşılaşılan akrokordonlar genellikle 5 milimetreden daha küçüktür. Nadirde olsa akrokordonlarda malignite görülebilir. Biz burada sol koltuk altında 17x13 x 4 cm boyutlarında dev bir kitleye ve kitlenin ağırlığından dolayı gelişmiş yaklaşık 2x3 cm çapında deri ulcerine sahip olan 84 yaşında bir kadın hastayi sunduk. Malign dönüşüm için bu tür ulcerlerin göz ardı edilmesi gerektiği hatırlatmak isteriz.

**Anahtar Kelimeler:** Fibrom; cilt; deri ulceri; traksiyon
In this article, the lesion that we presented draws attention with ulcer development in its origin in the axillary region by undergoing traction a result of gravity depending on the weight of this mass besides it is a giant acrochordon which a rare form of such lesions.

CASE REPORT

A 84-year-old female patient was admitted with complaint of the mass in the left armpit by claiming that it is innate and has grown steadily in recent years. She reported that there has been an unhealed wound on the mass for a few weeks. In the first examination, it was showed that a giant mass has a stalk in left axilla and oscillates freely, provides a solid image with touch. Ulceration area was observed to be about 2x3 cm in diameter in the origin of mass in the axilla (Figure 1). In the first observation, it was thought that ulcer can occurred due to traction by weight of the mass or malignancy. After the patient was informed, the mass was excised under local anesthesia. Open wound which formed after excision was closed by primary suture. Histopathological examination of the mass was made; it was histologically diagnosed as fibroepithelial polyp (acrochordon) which is 17x13x4 cm in dimensions with ulceration 2x3 cm in diameter on it. There was no any complications in the post-operative period in patients. We received the patient’s consent form about publishing all photographic materials.

DISCUSSION

In routine clinical cases, acrochordons are generally smaller than 5 millimeters. In the literature, it has been reported that the giant acrochordons are to be reached up to 8 cm in diameter and up to 2.5 kilograms in weight. We have determined in our case that fibroepithelial polyp were 17x13x4 cm in dimensions. Fibroepithelial polyps are known to be placed much more in lower extremities. The articles draw attention to report a giant acrochordon on major labia. A giant acrochordon case located in the scrotum was also reported in 2015. In our case, it is seen that placement of the mass is in the left axilla region.

Although it is rare, the malignancy is observed in fibroepithelial polyp. In general, the malignancy rate of skin tag is reported to be 0.37%. Agir et al. reported that a case developed squamous cell carcinoma on fibroepithelial polyp in knee region. Such cases should be examined carefully because malignant tumor can be developed in fibroepithelial polyp which are exposed to chronic irritation and inflammation. All fibroepithelial polyps which have these risks, especially giant fibroepithelial polyps should be excised and histopathological examination of these specimens must be done. In the literature, the authors seem to be unanimous about that fibroepithelial polyp can be malignant as a result of chronic inflammation and irritation. We saw in our case that it was ulcerated by the effect of gravity as a result of the weight of the mass without the irritation. In our histopathological examination, there was no an evidence for malignancy. However, we would like to remind that such ulcerations should not be ignored for malignant transformation.

FIGURE 1: A case of giant acrochordon observed ulceration in line of traction in the left axilla.
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Conflict of Interest

No conflicts of interest between the authors and/or family members of the scientific and medical committee members or members of the potential conflicts of interest, counseling, expertise, working conditions, share holding and similar situations in any firm.

Authorship Contributions

Idea/Concept: Rafet Özbe, Dursun Türkmen; Design: Rafet Özbe; Control/Supervision: Rafet Özbe, Dursun Türkmen; Data Collection and/or Processing: Rafet Özbe; Analysis and/or Interpretation: Rafet Özbe, Dursun Türkmen; Literature Review: Rafet Özbe; Writing the Article: Rafet Özbe, Dursun Türkmen; References and Fundings: Rafet Özbe; Materials: Rafet Özbe.

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