

Multiple Accessory Tragus with Cervical Chondro-Cutaneous Branchial Remnant of the Neck

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Citation: Bertoli C, Longo C, Di Lernia V. Multiple accessory tragus with cervical chondro-cutaneous branchial remnant of the neck. *Dermatol Pract Concept.* 2024;14(4):e2024257. DOI: <https://doi.org/10.5826/dpc.1404a257>

Accepted: May 15, 2024; **Published:** October 2024

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Funding: None.

Competing Interests: None.

Authorship: All authors have contributed significantly to this publication.

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Case Presentation

A 1-month-old female was referred because of multiple preauricular tags from birth. Physical examination revealed three skin-colored papules in the right preauricular region and another one, respectively, on the right and left cheek. Moreover, a small firm papule was noted on the right anterior sternocleidomastoid line (Figure 1). Similar lesions were reported in the paternal grandmother. Ultrasound revealed an accumulation of solid hyperechoic tissue with a fibro-lipomatous appearance not linked to deep soft tissues in the face and neck. No additional anomalies were detected after a pediatric evaluation. Audiometric test was normal. A diagnosis of congenital multiple and bilateral accessory tragus (AT) associated with cervical chondro-cutaneous branchial remnant (CCBR) was made. According to the parental decision, surgical excision was delayed.

Teaching Point

AT is a developmental defect caused by an incomplete fusion of the first and the second branchial arches during the fifth and sixth weeks of embryogenesis [1]. Commonly found in the preauricular region, AT may also occur anywhere along an imaginary line from the tragus to the mouth angle or the anterior border of the sternocleidomastoid muscle, leading to CCBR [1-2]. AT and CCBR are choristomas, consisting of skin, subcutaneous fat and/or cartilage. They present as a solitary papule/nodule at birth, though multiple lesions with family history are possible [1-2]. Differential diagnosis includes benign lesions of different derivation. A low risk of hearing loss may be associated with AT. Multiple or bilateral AT may be linked to the autosomal recessive Goldenhar syndrome (oculo-auriculo-vertebral spectrum) and autosomal-dominant forms of Townes-Brocks, Teacher-Collins,

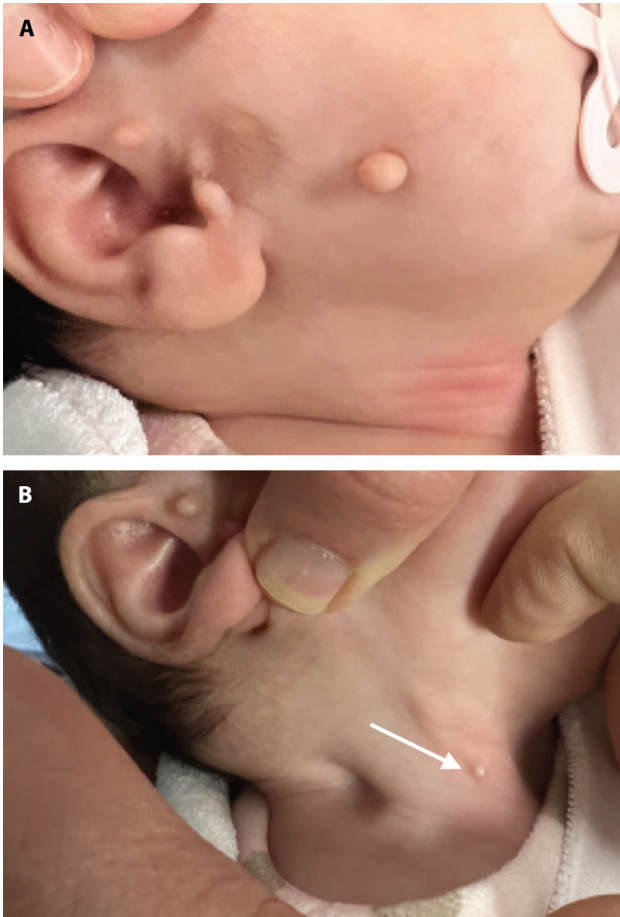


Figure 1. (A) Three tender papules on the right preauricular region, one of which occurs on an area of hypertrichosis, plus a larger pedunculated one on the right cheek. (B) A small firm papule on the anterior right sternocleidomastoid line.

VACTERL, Wolf-Hirschhorn syndromes [1]. CCBR is rather less common and may be associated with several non-auditory abnormalities as well as complex syndromes [2].

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