



Acquired Giant Digital Fibrokeratoma in a 55-Year-Old Man

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Received: Apr 15, 2026

Accepted: May 01, 2026

Published Online: May 08, 2026

Journal: Journal of Case Reports and Medical Images

Publisher: MedDocs Publishers LLC

Online edition: <http://meddocsonline.org/>

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Clinical Image Description

A 55-year-old male presented with a painless, progressively enlarging, horn-like projection over the lateral aspect of the right index finger for one year. On examination, the lesion was a solitary, pedunculated, exophytic growth measuring approximately 1.5 cm in length with a broad base of about 1 cm, arising from the lateral surface of the digit. A characteristic hyperkeratotic collarette was noted at the base, and the lesion had a firm consistency without tenderness or signs of inflammation. There was no history of preceding trauma or chronic irritation. Clinical differentials included cutaneous horn, verruca, and supernumerary digit. The lesion was excised under local anaesthesia with a narrow margin, and the wound was closed primarily.

Histopathological examination revealed a finger-like projection with marked hyperkeratosis and acanthosis of the epidermis, along with a core of densely packed collagen bundles arranged vertically in the dermis, consistent with digital fibrokeratoma. The absence of adnexal structures, cartilage, or neural elements excluded a supernumerary digit. Based on the lesion size and histomorphological features, a diagnosis of giant acquired digital fibrokeratoma was established. The postoperative period was uneventful, with complete healing by primary intention and no recurrence at three-month follow-up.

Acquired digital fibrokeratoma is a rare benign fibrous tumor of the digit that typically presents as a solitary, slow-growing lesion. The presence of a hyperkeratotic collarette and a central fibrous core are characteristic histopathology features aiding clinical diagnosis. Complete surgical excision is curative, with recurrence being rare when the lesion is entirely removed.



Figure 1: Pedunculated, horn-like lesion on the lateral aspect of the right index finger with a hyperkeratotic collarette.



Cite this article: Bhole S, Poshattiwar R. Acquired Giant Digital Fibrokeratoma in a 55-Year-Old Man. *J Case Rep Clin Images*. 2026; 8(1): 1173.



Figure 2: Oblique view showing the exophytic, finger-like lesion highlighting its pedunculated nature.



Figure 3: Excised specimen showing a keratinized, elongated lesion with a broad base.

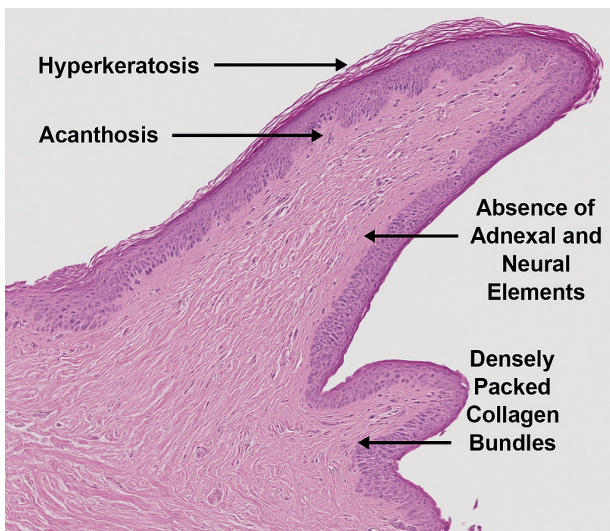


Figure 4: Histology showing hyperkeratosis, acanthosis, and dense collagen bundles without adnexal or neural elements. [HNE STAIN, 40x magnification].