A 37-year-old woman with no past personal or family history of interest was seen for 3 violaceous papules with superficial telangiectasias on the auricle of her left ear (Fig. 1). The papules had a hard consistency. The patient stated that the lesions bled easily, even after taking a course of oral antibiotics. Skin biopsy was reported as angiolympoid hyperplasia with eosinophilia. Given the diagnosis and the localized nature of the lesions, we decided to perform 2 cycles of cryotherapy. At the most recent follow-up, the lesions had decreased considerably in size.

Angiolympoid hyperplasia with eosinophilia is a benign angiolympo proliferative disorder. It is characterized by an endothelial proliferation with a lymphoid infiltrate in the dermis and hypodermis, and presents with soft, irregular papules and nodules of angiomatos us appearance. The differential diagnosis should include Kimura disease, pyogenic granuloma, angiom as, pseudolymphomas, granuloma faciale, and angiosarcoma. The most common symptom is pruritus and the most common site is in the periauricular region, as in our patient.

Figure 1