

## **Chondrodermatitis nodularis heliis**

### **What is chondrodermatitis nodularis heliis?**

Chondrodermatitis nodularis heliis (CDNH) simply means inflamed cartilage and skin forming a tender lump on the ear. The tender scaly lump develops most often on the most protuberant part of the ear where pressure is applied. It can develop from sleeping on a firm pillow or from wearing ill-fitting head phones or ear muffs that press on the involved area. The condition can also be precipitated by minor trauma.

### **What causes CDNH?**

The condition is thought to occur as a result of chronic sun damage, combined with physical pressure. Chronic sun damage causes thinning of the skin and physical pressure leads to damage to the skin and cartilage of the ear. This in turn leads to swelling and crusting. A lump then forms which is prone to more pressure. This pressure can also in turn worsen the problem.

### **What does CDNH look like?**

Initially there is a tender scaly area which may be flat or slightly raised. As the condition worsens, larger nodules develop and these may ulcerate.

### **What other problems can occur with CDNH?**

The condition is benign (non-cancerous). However, it can look similar to squamous cell carcinoma (skin cancer). Care should be taken to avoid incorrectly assuming that a skin cancer is chondrodermatitis nodularis heliis. Sometimes a biopsy may be necessary to differentiate between the two conditions.

### **How is CDNH diagnosed?**

The condition is usually diagnosed by a dermatologist examining the ear.

### **How is CDNH treated?**

The most important treatment is to prevent further pressure to the tender areas. Avoid sleeping on the affected side if possible. Pressure may be avoided by sleeping on a specially designed, doughnut-shaped pillow.

Sun protection is important to prevent further damage. Symptoms may also be relieved by avoiding excessive exposure to cold.

Tenderness may be alleviated by the use of topical corticosteroids or an intralesional steroid injection. Cryotherapy may help in some cases.

Removing the nodule may alleviate the condition. This involves surgical removal (excision) which is performed under local anaesthetic. After removal, sutures are used to repair the skin. CDNH can recur if causes such as pressure persist.

### **What is the likely outcome of CDNH?**

Without active management, the condition tends to wax and wane. It usually causes ongoing inconvenience with pain and tenderness.