Letter to the Editor

Wartlike Lump in a Chinese Woman With Bound Feet

To the Editor:
An 83-year-old Chinese woman presented to our clinic with bound feet (Figure 1). One month prior to presentation she noticed a plaque in the fold of her right foot that had gradually developed without any sensation. The lesion had occasionally bled. A medical history revealed that she had experienced an episode of cerebral thrombosis 5 years prior to presentation and had recovered without serious sequelae; otherwise, she generally was in good health. Physical examination revealed a plaque located at the flexor side of the third toe on her right foot (Figure 2). The plaque measured 1.5×1.5 cm and was flesh colored with a warty and erosive surface. In addition, her feet gave off a foul odor. Her feet had been bound during childhood. Physical examination revealed no other abnormalities. An acetowhitenizing test was negative. A wart was highly suspected, though the woman declined biopsy or other laboratory testing. Antiseptic solution was prescribed to prevent secondary infection. She was closely followed up weekly with telephone calls. Four weeks later she reported that the lump spontaneously disappeared.

Foot-binding was an extremely prevalent and popular custom that had been practiced in China for centuries. It began in the Song Dynasty (AD 960-1280), reportedly to imitate an imperial concubine who was required to dance with her feet bound. Millions of Chinese women had their feet wrapped to turn them into so-called 3-inch golden lotuses.

Foot-binding was first outlawed in China in 1912 following the Taiping Rebellion and again after the foundation of the People’s Republic of China in 1949. A study in 1997 of foot-binding among older Chinese women in Beijing (N=193) showed that 38% of women aged 80 years and older and 18% of women aged 70 to 79 years had bound-foot deformities.

A wart is a localized proliferative lesion caused by human papillomavirus (HPV) infection. Warts develop in intertriginous areas that tend to be less keratotic. Because our patient declined to receive any laboratory tests, the diagnosis was purely based on clinical presentation. Pyogenic granuloma, amelanotic melanoma, and squamous cell carcinoma (HPV associated or non-HPV associated) should be considered in the differential...
diagnosis. Most warts have a self-limiting course, which is an important clue in differentiating them from other neoplasms.

Today, the presence of elderly women with bound feet is uncommon. Our case educates physicians of a rare sequela of an eccentric practice in ancient China.

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Acknowledgment—This work was supported by the Program for Innovative Research Teams in Universities (LT2011012), Programme of Doctoral Training (20070159020), Ministry of Education of the People’s Republic of China.

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The authors report no conflict of interest.

REFERENCES