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A case of a pigmented nodular basal cell carcinoma from a congenital melanocytic nevus in a 68-years old female

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Basal Cell Carcinoma (BCC) is the most common skin malignancy seen in sun-exposed areas. Pigmented Nodular Basal Cell Carcinoma (PBCC) is a clinical and histologic variant of BCC. Aside from displaying features seen in nodular BCC, it also contains increased brown or black pigment, the presence of which makes it necessary to rule out melanoma. Congenital Melanocytic Nevi (CMN) on the other hand is common skin lesions that carry a risk of malignant transformation, especially melanoma. We report a case of a 68-years old female with a congenital well-defined light-brown macule measuring approximately 3 mm at the right deltoid area. It has been stable ever since until in a span of one year, the macule gradually increased in size associated with pruritus and easy bleeding upon minor trauma and progressing to become ulcerated. Dermoscopically, multiple gray globules, blue-gray ovoid nests, arborizing vessels and micro-ulcerations were seen while histologically, it showed clusters of basaloid cells with palisading of nuclei. Artifactual retraction spaces between the tumor and stroma as well as pigment-containing cells were also noted. These findings are consistent with PBCC. The patient was treated with standard excision. PBCC from a CMN is a rarity. Prompt diagnosis and management gives a favorable prognosis. Though CMN is a common skin lesion capable of transforming into a malignancy, to the best of our knowledge, PBCC arising from them has rarely been reported.

Biography

Angela E Sison-Galigao is currently a Resident at the Department of Dermatology in Southern Philippines Medical Center in Davao City, Philippines.

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