



DERMATOPATHOLOGY

CUTANEOUS NEUROCRISTIC HAMARTOMA PRESENTING AS CUTIS VERTICIS GYRATA: A STRANGE AND RARE ASSOCIATION

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BACKGROUND: we present the case of a 59-years-old woman who presented with a generalized alopecia of the scalp, occurred after chemotherapy regimen with docetaxel for breast cancer diagnosed five months before.

OBSERVATION: physical examination showed a total alopecia of the scalp, revealing a cerebriform grayish-blue pigmented plaque over the right parietal region, since puberty. The surface of the plaque was gyriform with markedly decreased hair on the gyri as compared with that on the rest of the scalp. The patient performed a cutaneous biopsy, which showed extensive dermal dendritic melanocytes and spindle cells associated with prominent erector pili muscles. Sections showed a proliferation of schwannian-type spindle cells and nests of pigmented melanocytes in the dermal interstitium between hair follicles with slightly decreased follicle counts. Immunohistochemical stains displayed melanocytes positive for HMB-45 and S-100. CD34 expression was prominent within the stroma. HMB-45 stain was negative within the dendritic and pigmented cells. Based on clinical presentation and the histologic features the lesion was diagnosed to be a cutaneous neurocristic hamartoma (CNH) presenting as a cutis verticis gyrata (CVG). The progressive alopecia was due to chemotherapy, completely resolved after the end of the treatment.

KEY MESSAGE: the particularity of this case, besides the rarity, it's that chemotherapy-induced alopecia allowed us to see and diagnose this hamartoma.

