DERMATOPATHOLOGY

CUTANEOUS PLASMACYTOSIS:REPORT OF A CASE AND REVIEW OF THE LITERATURE

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Background:Cutaneous and systemic plasmacytosis are reactive disease that occur in middle-aged Japanese and Chinese men. Systemic plasmacytosis, defined by plasmacytic infiltration of two organ systems, might rarely progress to lymphoma. Cutaneous plasmacytosis, however, is chronic and benign and is characterized by the development of multiple plasma cell-rich infiltrates in the skin.

Observation: A 33-year-old male patient presented to our hospital with a one-year history of nonpruritic, nontender brown plaques over trunk, armpits and groins. He had hepatitis B and gout but did not take any medications. He complained of weakness but denied fevers and other symptom. Physical examination showed no lymphadenopathy. Laboratory examination showed polyclonal hypergramma globulinemia while RPR,HIV and HCV was negative, and IgG4 was normal. Ultrasonography showed prominent bilateral inguinal lymph nodes measuring 1.5 centimeters. The skin biopsy specimen revealed dermal infiltrates of mature plasma cells and lymphocytes with coexistence of both kappa and gamma chain-positive cells. After excluding Castleman disease and IgG4 disease. He was diagnosed as cutaneous plasmacytosis and was given thalidomide. Two months later, his plaques were regressing.

Key Message: Although most of these Cutaneous plasmacytosis showed a benign clinical course, few cases have shown a aggressive clinical course with a fatal outcome when reviewed the literature. Therefore, long-term follow up is necessary