



DERMATOPATHOLOGY

## PENILE INTRAEPITHELIAL NEOPLASIA: CASE REPORT AND REVIEW OF LITERATURE

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**BACKGROUND:** Penile intraepithelial neoplasia (PeIN) is a rare disease that can be associated with great morbidity and mortality. The risk of progression from PIN to invasive carcinoma is estimated to be between 10% and 30%. Treatment options include topical chemotherapy, immunotherapy, laser treatment, photodynamic therapy and surgical excision. Our aim was to evaluate the outcome of both cryotherapy and imiquimod to treat PeIN

**METHODS:** A 24 year-old presented with lesion at the meatus on the glans penis of 4 months duration for which he had not previously sought medical attention. He had at the beginning a surgical excision.

**RESULTS:** Histologic results showed epidermal acanthosis, prominent atypical parakeratosis. The epithelium is replaced by a monotonous population of small to intermediate sized cells. In the upper layers of the epidermis presence of numerous koilocytes who have vacuolated scant basophilic cytoplasm and indistinct cell borders with shrunken nuclei. There was no evidence of an invasive component. Immunohistochemical (IHC) studies showed positive staining of these cells for p16. Ki67 proliferation index was 90%. Based on these histologic and IHC findings, the final diagnosis of PeIN was established. The limits of excision cannot be evaluated. The postoperative course is marked by a recurrence of the lesion. The patient then benefited from a treatment by cryotherapy and imiquimod with a good evolution and complete disappearance of the lesion.

**CONCLUSION:** Given the favorable response and purported benefits of combination therapy, we propose the use of cryotherapy with topical imiquimod in the treatment of PeIN.

