

DERMOSCOPY AND SKIN IMAGING

## MELANOMA OF THE LIP: CLINICAL AND DERMOSCOPY CORRELATION ABOUT 2 CASES

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Introduction: Dermoscopy is a noninvasive diagnostic technique that permits the visualization of morphologic features that are not visible to the naked eye. It is currently widely used for examination of pigmented skin lesions. However dermoscopy of mucous membranes is significantly less investigated by clinicians, hence there is a necessity to intensify research on this topic in order to identify clear dermoscopic criteria for early diagnosis of mucosal melanoma which is a rare and aggressive entity of melanoma.

Observations and discussion: We report two cases of melanoma of the lip, through which we discuss the interest and contribution of dermoscopy in mucosal melanoma.

To a few cases described in the literature, mucosal melanoma presented usually a multicomponent pattern, but in some cases it may be showed a homogeneous pattern. The most common dermoscopic features is asymmetry of structure, multiple colors, abrupt cutoff of the pigment pattern at the periphery of the lesion, blue-white veil that corresponds histologically to an acanthotic epidermis with focal hypergranulosis above sheets of heavily pigmented atypical melanocytes; regression structures manifested thinning of the epidermis, the absence of melanin pigment at the dermoepidermal junction, and effacement of the rete ridges. Furthermore, irregular dots or globules, irregular pigmented pseudonetwork contained scattered nests of atypical melanocytes at the dermoepidermal junction without hair follicle lesions; irregular diffuse pigmentation with melanophage infiltration in the dermis and atypical melanocytes in the epidermis, and irregular vessels, are also usually described.

In our patients, the blue-white veil, ulceration and atypical vascular pattern are suggestive of invasive melanoma.

Conclusion: Dermoscopy appearance of the lip melanoma proved similar to that of cutaneous melanoma, but these results need to be confirmed by larger series.





