



MELANOMA AND MELANOCYTIC NAEVI

ACRAL LENTIGINOUS MELANOMA, INDOLENT SUBTYPE

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Background: The indolent subtype described by Kim J., and collaborators in 2014, highlights the clinical importance and histological correlation to establish the correct diagnosis and treatment to offer to the patient. Histologically characterized by slightly atypical melanocytes, its direct association with lentiginous acral melanoma is difficult considering only the histological result but the clinical characteristics are strongly compatible with it.

Observation: We present 3 cases of acral lesions which share a clinical suggestive of malignancy, but the histological results do not allow us to classify it as acral lentiginous melanoma. After radial growth for several years, it progresses to be invasive, causing a gloomy prognosis. We identified few atypical cells in the histological study insufficient to make an unequivocal diagnosis of acral lentiginous melanoma in situ.

Key message: The clinical and histological correlation is fundamental for the diagnosis of melanoma indolent subtype, histologically characterized by few atypical melanocytes limited to the basement membrane and identified with immunohistochemically markers HMB45 and MELAN A. The establishment of the total excision of the lesion and complete histology study of the bloc, will allow to establish the adequate diagnosis as acral lentiginous melanoma and the correct treatment based on the clinical and histological association.

