



A new ERA for global Dermatology 10 - 15 JUNE 2019 MILAN, ITALY

MELANOMA AND MELANOCYTIC NAEVI

## NEVUS LIPOMATOSUS CUTANEOUS SUPERFICIALIS: A MULTI-CENTER CASE SERIES OF 10 PATIENTS

J Gatmaitan (1) - J Dayrit (1)

Research Institute For Tropical Medicine, Dermatology, Filinvest Corporate City, Alabang Muntinlupa City, Philippines (1)

Background: Nevus lipomatosus cutaneous superficialis (NLCS) is a rare benign hamartomatous skin condition of unknown etiology. Clinically, NLCS can be classified into two clinical types: 1) Classical Hoffman-Zurhelle or the multiple type and 2) solitary pedunculated type. Both types are characterized by soft, flesh-colored or yellow papules some with cerebriform surface. Histopathologically, hematoxylin-eosin would reveal mature adipose tissues interspersed with thickened collagen bundles in the dermis which is pathognomonic of NLCS.

Observation: The purpose of the study is to describe the clinical and histopathological features of ten Filipino patients with NLCS. This study was a retrospective case series of ten NLCS in Filipino patients. For each patient, the following datas were recorded: age, sex, duration and location of lesions. All patients voluntary requested removal of lesions for cosmetic reasons. Consent for photography, dermoscopy and biopsy were obtained in all patients. Histopathologically, all of the ten cases were consistent with NLCS. Multiple cases were diagnosed as giant acrochordon or fibroepithelial polyp prior to excision biopsy. The average age at diagnosis was at 42 years old. The mean duration of the lesion was 20 years. Based on the location of the lesions, most common were seen on the lower extremities with 6 (60%), followed by the upper extremities 3 (30%) and 1(10%) on the face. Surgical excision was effective and no recurrence was observed.

Key message: We hope that the result of the case series will guide Filipino dermatologists in differentiating NLCS from a giant acrochordon or fibroepithelial polyp clinically. A good clinical eye together with histopathology remains to be the gold standard for the diagnosis of this skin condition. Excision remains to be one of the most effective treatment of choice with minimal recurrence. Other treatment modalities such as CO2 laser and cryotherapy may also be offered.





