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NAIL DISORDERS

EXUBERANT SUBUNGUAL KERATOACANTHOMA

Jf Ramírez Oliveros (1) - Ci Salas Callo (1) - R Carvalho De Nakamura (1)

Instituto De Dermatologia Professor Rubem David Azulay, Santa Casa De Misericórdia Do Rio De Janeiro, Department Of Dermatology, Rio De Janeiro, Brazil (1)

Background: Also called solitary distal digital keratoacanthoma, this rare squamo-proliferative benign neoplasm behaves more aggressively at subungual location than other sites and spontaneous regression is uncommon. Aetiology is unknown, although some factors have been associated as trauma, coal tars and chemical carcinogens. It has been pointed the importance of accurate diagnosis because the lesions are often confused with squamous cell carcinoma (SCC). There are some clues that permit us to recognize SK, as the rapid growth of the tumor and immunohistochemical, with Ki67 being over expressed in SSCC compared with SK. Clinically and radiologically SK has some features in common with SCC and differs histologically in showing little or no squamous cell dysplasia. Preoperative recognition of SK can lead to successful local treatment without unnecessary destructive surgery and loss of function. ?

Observation: A 62-year-old woman presented with a 4-month history of a vegetant lesion, painful and rapidly growing in the subungual region of the left hallux. She reported local trauma six months before. Physical examination revealed the presence of a hyperkeratotic lesion of 2,0 x 1,6 cm of dimension, with some black dots within the scales. The differential diagnosis was made as squamous cell carcinoma (SCC), bowen disease, subungueal keratoacanthoma (SK), verrucous carcinoma and viral wart. Plain foot radiography was normal, without osteolytic lesion. Considering these findings, we accomplished a complete excision of the lesion, adopting a conservative approach. Microscopically, the lesion shows marked acanthosis and hyperkeratosis with large squamous cells with glassy cytoplasm. Based on clinical, radiologic, and histologic findings, diagnosis of a SK was made.

Key message: According to literature, SK has a higher prevalence in young men and a tendency to appear on fingers, particularly the thumb, accompanied by extensive bone destruction. None of the previous data were observed in our case.





