PIGMENTATION

GIANT CONGENITAL MELANOCYTIC NEVUS: ABOUT A CASE

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Background: Congenital melanocytic nevi (CMN) are large brown-to-black skin lesions caused due to genetic mutations which leads to abnormal proliferation of embryonic melanoblasts. Besides malignant transformation, patients with giant congenital melanocytic nevi (GCMN) need to be periodically assessed for neurological abnormalities and psychosocial impairment.

Observation: The patient is a 20-year-old woman who consulted for several pigmented patches over her body. The parents of the patient did not have a consanguineous marriage. None of the close family members had similar skin lesions. On examination, an extensive pigmented nevus was observed encompassing the neck, the back, the breast and the arms. Numerous smaller satellite nevi were also observed on the face, the gluteal region, the abdomen and the limbs. No other congenital anomaly was observed and neurological examination was normal. A clinical diagnosis of GCMN was made. The patient was advised frequent follow-up visits and an MRI scan of the brain and spine was scheduled.

Key message: CMN with a diameter greater than 20 cm have an estimated incidence of between 1/20,000 and 1/500,000 births. A nevus with a projected adult size greater than 40 cm is classified as GCMN. They are posed at a significantly greater risk of transforming into malignant melanomas. Another complication associated with GCMN is neurocutaneous melanosis. Management of GCMN is symptomatic and palliative and includes surgical and non-surgical procedures, psychological intervention and clinical follow-up.