



SKIN CANCER (OTHER THAN MELANOMA)

A RARE CASE OF MERKEL CELL CARCINOMA ON THE GLUTEAL AREA TREATED WITH CHEMOTHERAPY AND RADIATION THERAPY

M Doria-ruiz⁽¹⁾ - D King-ismael⁽¹⁾ - M Abad-venida⁽¹⁾

Jose Reyes Memorial Medical Center, Dermatology, Manila, Philippines⁽¹⁾

Background: Merkel Cell Carcinoma (MCC) is a rare, aggressive cutaneous malignancy, with a poorer prognosis than melanoma. The factors strongly associated include age over 65, fair skin, extensive sun exposure, chronic immune suppression and polyoma virus. Most of the MCC lesions are <2 cm, with a majority located over sun-exposed areas of the head, neck and extremities. This is the case of a 68-year-old female who consulted due to an enlarging mass on the gluteal area. Upon diagnosis, the lesion was 11x8 cm in widest diameter, with an erythematous and moist surface. The histopathologic diagnosis using hematoxylin and eosin (H&E) stain, as well as immunohistochemical staining using cytokeratin-20 was consistent with MCC. The patient was subjected to chemotherapy (carboplatin and etoposide) and radiation therapy, which resulted in resolution of the lesion. However, later in the treatment, abdominal CT scan revealed a pancreatic new growth. Shortly after, the patient died of complications from the pancreatic carcinoma.

Observation: MCC may be located in areas not or rarely sun-exposed. The consideration of MCC should not be limited to lesions < 2cm. The patient's skin biopsy on H&E stain was non-specific and revealed findings that may be compatible with a number of conditions. Hence, the need for immunohistochemical staining like cytokeratin-20 is really imperative for proper diagnosis. Given the aggressiveness of MCC and the systemic treatment chosen for the patient, resolution of the skin lesion did not guarantee that the patient will not succumb to either the treatment effects or other co-morbidities.

Key Message: There is a consensus from the National Comprehensive Cancer Network regarding MCC management. The recommended first line of treatment is surgery, but this was not feasible for our patient. The choice of management will still depend on the size of patient's lesion, general condition and tolerability of treatment.

