SKIN CANCER (OTHER THAN MELANOMA)

A RARE CASE OF PRIMARY CUTANEOUS APOCRINE CARCINOMA

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Background: Primary cutaneous apocrine carcinoma is a rare adnexal malignant tumor, which originates from apocrine sweat glands. Clinically, PCAC usually presents as an indolent and slow-growing solitary nodule located at the axillary region, but some cases of rapidly progressive and aggressive tumor are reported. It has been described for the first time by Horn et al. in 1944, and only few hundreds cases are described in Literature worldwide. For this reason, there are no clear guidelines for the management and treatment of this uncommon cancer.

Observation: A 86 year-old woman was hospitalized in our Department for an extended cutaneous lesion of the right axillary and mammary region. Multiple infiltrated crusted-scaly lesions of variable shape and size were present, localized on the right external mammary region. The cutaneous perilesional region, involving breast, axillary cord and the right upper limb, appeared hot, erythematous and edematous. Right axillary and latero-cervical lymph nodes were palpable and painful. Ultrasonography, chest X-ray and mammography were performed in order to exclude a cutaneous metastatic breast tumor, with negative results. We performed a cutaneous biopsy, resulting in a “malignant tumor with epithelial phenotype and acantholytic aspects (panCK-positive and negative melanocytic markers) with aspects of intraepithelial pagetoid dissemination, suggesting carcinoma originated from apocrine adnexal structures”.

Key message: We have described this case to underline the rarity of primary cutaneous apocrine carcinoma: less than 100 cases are described in literature worldwide. Indeed, there are no clear guidelines for the management and treatment of this uncommon cancer. Dermatologists should be aware of the existence of apocrine carcinoma and they should suspect this uncommon entity in presence of a cutaneous nodule located in the axillary region. Multidisciplinary approach is essential for management and treatment of this patients and regular follow up should be encouraged.