



SKIN CANCER (OTHER THAN MELANOMA)

BASALOID SQUAMOUS CELL CARCINOMA OF THE SCROTUM – A RARE VARIANT

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Background: Squamous cell carcinoma (SCC) of the scrotum was one of the first occupational diseases to be described, however is rare with only a very few series reported in literature. Frequently, it presents as a solitary plaque or nodule on the scrotum in the fifth decade.

Observation: A 77-year-old man, with history of psoriasis for 60 years, presented with a 4-year history of ulcerated lesions of the scrotum. There was no history of fever, sexual-transmitted diseases or other high risk behaviours. The patient did not have an occupational history related to chimney sweeps, distillates of coal or exposition to mineral oil. Clinical examination revealed four erythematous, pruriginous, ulcerated and infiltrative plaques of the scrotum covered by an haemorrhagic crust, one on the right scrotum and three on the left with a diameter of about 2 cm. The lesions appeared to be free from the underlying testis. There was no associated inguinal lymphadenopathy. The rest of the physical examination was unremarkable. Excisional biopsy of the lesions showed areas of the epidermis and hair follicles partially to completely replaced by atypical cells with mitotic activity and an invasive basaloid component consistent with basaloid carcinomas of the scrotum. The patient has been followed regularly for 24 months without evidence of recurrence or new lesions till this moment.

Key message: Basaloid carcinoma is an aggressive, uncommon and distinctive morphologic subtype of SCC frequently associated with high risk human papilloma virus (HPV). Historically considered an occupational disease, its epidemiology has changed in recent years and apart from HPV and petrochemical compounds, other factors such as poor hygiene, radiotherapy and chronic inflammation may play a role in the development of these tumours. Surgery with a negative resection margin offers the best therapeutic strategy.

