ABSTRACT BOOK ABSTRACTS



SKIN CANCER (OTHER THAN MELANOMA)

CUTANEOUS CARCINOSARCOMA OF THE UPPER LIMB: CASE REPORT

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BACKGROUND: Primary cutaneous carcinosarcoma is a rare non melanoma skin cancer. It is a biphasic tumor mostly reported over the sun exposed skin of elderly men. We report a case of squamous cell subtype carcinosarcoma.

OBSERVATION: An 85 year-old male, prostrate, with no known history of cancer, was referred to our center for evaluation of two exophytic masses measuring 8 x 5 and 2 x 2 cm on the posterior aspect of his left forearm and elbow respectively that had appeared as a small nodule 3 months earlier. The masses were excised. On histology, a poorly differentiated SCC admixed with osteosarcoma and chondrosarcoma was revealed. Both elements presented with nuclear atypia. Resection margins resulted to be compromised. Reintervention for adequate margin control was not possible, evolving three months later with abdominal skin metastasis, left lymph axillary node infiltration and death.

CCS is comprised of epithelial and sarcomatous features. There are different theories regarding its pathogenesis. A single cancer stem cell differentiating into those two lineages is the most accepted. CCS can be classified according to the epithelial component involved in epidermal or adnexal. The epidermal component is predominantly Basal Cell Carcinoma or SCC and the sarcomatous component includes chondrosarcoma, osteosarcoma, rhabdomyosarcoma and others. Both components must show malignancy criteria to be diagnostic and share clonality on inmunophenotypic studies.

CCS primary treatment is surgical excision and its prognosis depends on the epithelial subtype. Adnexal and SCC behave more aggressively than BCC subtype.

KEY MESSAGE: Long-standing lesions, large tumors, SCC and adnexal subtyped CCS should be considered aggressive and poor prognosis expected.





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