



SKIN CANCER (OTHER THAN MELANOMA)

CUTANEOUS METASTASIS IN A PATIENT WITH HEAD AND NECK CARCINOMA ASSOCIATED WITH DERMATOMYOSITIS: A CASE REPORT

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Background: Skin metastasis from a non-cutaneous primary malignancy is a rare event seen only in 1 to 9% of patients diagnosed with internal malignancies. Its occurrence from head and neck carcinoma is considered an unusual phenomenon, with an incidence rate of 1%, and is associated with a poor outcome. In this report, we discuss a case of a patient with Dermatomyositis who was found to have an inframastoid, keratinizing squamous cell carcinoma and who developed cutaneous metastasis on her neck.

Observation: A 61-year-old, female, admitted for the management of her Dermatomyositis was found to have keratinizing squamous cell carcinoma of an inframastoid mass upon undergoing right mastoidectomy and tumor excision. The plan was for the patient to undergo stereotactic radiosurgery when she developed multiple, skin colored, discrete and firm papules on her neck which rapidly progressed into darkly erythematous and hemorrhagic nodules. Skin punch biopsy findings were suggestive of squamous cell carcinoma (SCC) and pancytokeratin staining showed results consistent with metastatic SCC. Proposed multidisciplinary management of the condition which included chemotherapy and radiotherapy did not push through as the patient expired a few days upon confirmation of her diagnosis.

Key message: Recognition of cutaneous metastasis is difficult as it is seldom encountered in practice. It requires careful attention and a high index of suspicion. This report highlights the rare occurrence of cutaneous metastasis from a patient with head and neck cancer associated with Dermatomyositis. It illustrates the connection of one dermatologic case to another, substantiating the role of dermatologists on the patient's continuum of care.

