

SKIN CANCER (OTHER THAN MELANOMA)

CUTANEOUS SQUAMOUS CELL CARCINOMA WITH DELAYED DIAGNOSIS – CASE SERIES

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Background: Cutaneous squamous cell carcinoma (cSCC) is the second most common form of skin cancer with increasing incidence, especially in light-skinned people. Although squamous cell carcinoma on the skin has better prognosis than tumor on the mucous membranes, it can cause significant morbidity and surgical removal can cause serious disfigurement, especially if the treatment is delayed.

Observation: We present series of three patients with cSCC, diagnosed in an advanced stage.

Patient No I had ulcers on the penile skin for over a year, before being examined by a dermatologist. At the first dermatological examination, cSCC was diagnosed, and he was sent to the urologist. Total penile amputation was made, and this patient is currently under follow-up.

Patient No II had small ulcers on the lower lip and a large swelling of the chin, which lasted longer than 6 months and gradually increased. This patient has been treated as a deep mycosis for more than two months before being referred to a dermatologist. Suspicion was raised on cSCC and patient was referred to the surgeon. A detailed examination revealed distant metastases and the patient died shortly afterwards.

Patient No III had Discoid lupus erythematosus during last seven years. He was not treated regularly and did not use photoprotective products. He called for a dermatologist's examination because of numerous irregular nodular lesions on both earlobes, covered with tick crusts. Skin biopsy was performed and histopathologic examination revealed cSCC. Both earlobes were amputated, and patient is alive, with significant disfigurement.

Key message: Patients in this series have been diagnosed as cSCC in the advanced stage, with serious consequences. Early dermatological diagnosis in these patients would give better results and a much better quality of life.