



SKIN CANCER (OTHER THAN MELANOMA)

EARLY DIAGNOSTIC CLINICAL SIGN FOR PRIMARY CUTANEOUS ANGIOSARCOMA OF THE FACE

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Background: Angiosarcoma is a rare malignant tumor accounting upto 2% of all sarcoma. Cutaneous angiosarcoma of the face and scalp is often missed in its early stage despite being the commonest presentation of all the angiosarcomas due to subtle bruise like clinical presentation and lack of histological correlation.

Observation: A 76 years old male with fitzpatrick skin type IV presented with the asymptomatic bruise like lesion across the right mid forehead for a month. On examination, violaceous non blanchable erythematous patch extended from midline across the mid forehead to temple on the right side with ipsilateral mild swelling of the lower eyelid. A clear sparing of the lower third of the forehead was present and clinically diagnosed as cutaneous angiosarcoma. Other systemic examination was unremarkable. Biopsy of the lesion at right forehead suggested acquired haemangioma. All the routine investigations were normal. Lesions continued to expand slowly and extended into the scalp and right cheek. Nodules appeared in the scalp almost six months later. Repeat biopsy and histopathologic examination remarked as cutaneous angiosarcoma. Immunohistostain for CD31 and Ki67 was positive and negative for Cytokeratin and CD34. Tumor has metastasized to the right cervical lymph nodes. Even in the late stages the sparing of the lower forehead adjacent to eyebrows was present.

Key Message: Rarity of the condition and non confirming histological features in the early stage of cutaneous angiosarcoma may delay diagnosis. Sparing of the lower third of the forehead was present at initial as well as late stage in our case and can be considered as telltale sign of angiosarcoma. Immunohistochemistry should be done at initial presentation if clinical suspicion is high to establish the diagnosis.

