



SKIN CANCER (OTHER THAN MELANOMA)

## **LARGE DERMATOFIBROSARCOMA PROTUBERANS**

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**Background:** Dermatofibrosarcoma protuberans (DFSP) has been described as a rare cutaneous soft tissue sarcoma with little metastatic potential but a significant risk for local recurrence related to the extent of resection. It is characterized by slow enlargement over years. Trunk is the most common involved site. Most tumors have a size less than 5 cm. A complete surgical resection is the optimal treatment for localized DFSP. Wide excision is usually performed with at least 3 cm margins. Mohs micrographic surgery (MMS) is preferred for recurrent or large tumors and those arising in anatomically difficult areas such as the head. The choice between them is based on technique availability, experience of surgeon, cost, location and size of tumor. Radiotherapy is only rarely used as primary treatment for localized disease. We report a new original case with large DFSP that was treated successfully by large surgical excision.

**Observation:** A 40 year old woman presented for abdominal plaque that appeared 15 years ago and was gradually followed by several nodules in the same area. A yellow brown multinodular plaque measuring 15,2 cm x 10,1 cm was found on abdominal examination. Excisional biopsy from an abdominal nodule showed a cellular proliferation of spindle type arranged in a storiform pattern around the vessels infiltrating the dermis and hypodermis. Immunohistochemistry was positive for CD34. These results were compatible with DFSP. MRI of the thorax, abdomen and pelvis confirmed the absence of metastases. Wide excision with 3-cm margins and reconstruction after 7 days by skin flap from the right thigh were successfully done. Patient was followed one year post surgical resection with no signs of local recurrence.

**Key message:** In the absence of randomized controlled trials on the best modalities of treatment, it is important to report such rare cases and their treatments outcomes.

