ABSTRACT BOOK ABSTRACTS



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SKIN CANCER (OTHER THAN MELANOMA)

MERKEL CELL CARCINOMA: AN AGGRESSIVE MALIGNANCY RESPONDING TO RADIOTHERAPY AS MONOTHERAPY

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Background: Merkel Cell Carcinoma (MCC) is a rare and potentially-lethal neuroendocrine cutaneous malignancy, with an increasing incidence of 0.3-1.6 per 100,000 people per year. It originates from mutational UV damage and/or infection from the Merkel Cell Polyomavirus (MCPyV), particularly in the elder population and those with immunosuppression or other malignancies. Clinically has no distinctive features, but usually presents as a rapidly-growing cutaneous or subcutaneous tumour located on sun-exposed areas. Histopathology and immunohistochemistry are required to establish the diagnosis. Metastases are present in a third of the patients at diagnosis. Treatment is multidisciplinary, involving wide excision and/or radiotherapy for initial stages, whilst chemotherapy and immunohierapy are reserved for advanced cases.

Observation: A 61-year-old female presented a 2-month asymptomatic growing tumour on her upper lip. On examination, the tumour was pink, with telangiectasias, well-circumscribed, infiltrating, and measured 1.7x1.4x 0.6cm. No other abnormalities were found. Incisional biopsy was performed, and histopathology reported MCC with CK20 and neuron-specific enolase positive stains on immunohistochemistry. Imaging studies did not show lymph node invasion or metastasis. The patient was programmed for wide-excision but the tumour doubled in size by the time of the surgery. Radiotherapy was chosen as monotherapy at 60Gy, according to NCCN guidelines. Complete response was observed after 25 sessions. At the 39-month follow-up visit the patient remained disease-free.

Key message: MCC is an infrequent but very aggressive tumour. Although the pathophysiology is not fully elucidated, current evidence suggests that UV mutations and MCPyV share oncogenic mechanisms, the former being associated with worse prognosis. Early diagnosis is key to prevent dissemination. Thus, awareness of this increasingly-incident entity cannot be underestimated. Radiotherapy can be used as postoperative adjuvant, and as monotherapy in subjects who refuse surgery or with significant morbidities.





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