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SKIN CANCER (OTHER THAN MELANOMA)

## MULTIPLE BASAL CELL CARCINOMA IN CHRONIC KIDNEY DISEASES ONGOING HAEMODIALYSIS PATIENT

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Background: Basal cell carcinoma (BCC) in Asian is lower than Caucasian which more common in older people, frequently man than women. People with chronic kidney diseases (CKD) are at higher risk for cancer, previous study reported that CKD patient undergoing haemodialysis have higher risk of developing non-melanoma skin cancer (NMSC). One study showed that the incidence of NMSC in patient CKD ongoing haemodyalisis is less than in CKD post transplantation with immunosuppression drug. We present one rare case, a 68 years women who has multiple BCC in CKD undergoing haemodialysis.

Observation: A woman, 68 years old, street vendor has had a history of CKD since 4 years ago and she has been undergoing hemodialysis. Since 2 years ago, she had pigmented papule on ala nasi sinistra that easy to bleed, 0,4x0,3 cm in diameter, with dermoscopy (DS) finding suspect BCC, histopathology examination by shave excision biopsy followed by electrosurgery (ED&C) showed nodular pigmented type of BCC. Since 1 year ago, she complained a hyperpigmented plaque at colli anterior sinistra region 1x1,8x0,1 cm. There was gradual increasing in size of this plaque since 6 months ago and it was bleeding easily. It is covered by erosion and black crusts. DS revealed black dot, ulcer, suspected pigmented BCC. Histopathology examination by punch biopsy showed pigmented type of BCC. We treated that lesion at colli anterior sinistra with elliptically wide excision, the margin was 4mm of the lesion. The treatment gave good result. At present, there is no recurent.

Key message: The initiated dermatologic examination must be done regularly in CKD patients pre-dialysis who have beningna tumor lesions.





