



SKIN CANCER (OTHER THAN MELANOMA)

RELAPSED PERIPHERAL T-CELL LYMPHOMA PRESENTING AS GIANT CHRONIC NON- HEALING SKIN ULCER

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Background: Peripheral T-cell lymphomas (PTCLs) belong to the group of non-Hodgkin lymphoma, which are of mature T cells lymphoproliferative neoplasms. Peripheral T-cell lymphomas, not otherwise specified (PTCLs/NOS) are commonest subtype of the PTCLs and its molecular pathology is unclear yet, which are being characterised by variable morphology, usually aberrant immunophenotype, and aggressive clinical course. Majority of patients relapse quickly, and the 5-year survival rates are only 10-30%.

Observation: A 55-year-old man presented to our department complaining with a six-month history of skin ulcer in his posterior neck and left arm. Six years ago, he had received a classic dermatologic surgery to remove the tumor in his left arm about six years ago. The pathologic results showed that it was a lymphoma. At presentation, the ulcer in the neck measured 3.5 × 3 cm² with a depth of 0.5 cm with distinct margins and adherent scar. Skin lesion in the left arm is similar to the lesion in the neck. The tissue biopsy showed 'peripheral T-cell lymphoma, not otherwise specified'. Immunocytochemistry and EBER in situ hybridization showed T-cell phenotype CD3+, CD4+, CD20-, CD2+, CD79a-, CD21-, CD23-, CD5-, CD7-, CD8-, Bcl6-, Bcl2+, GranzymeB+, c-Myc (Y69)+. Proliferation fraction on Ki-67 immunostaining was approximately 70%. The patient was advised to receive radiotherapy.

Key messages: Our case highlights the importance of focusing on the early cutaneous manifestation of the peripheral T-cell lymphoma.

