



SKIN CANCER (OTHER THAN MELANOMA)

SQUAMOUS CELL CARCINOMA ON TRICHILEMMAL CYST

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Background: The trichilemmal cyst, also called hair cyst, is a dermal epithelial cyst developed at the expense of the hair follicle. It affects Caucasian women with a mean age of 60 years more frequently. They are most often asymptomatic, localized mainly on the scalp. These tumors are often benign but local recurrences sometimes aggressive. The risk of degeneration of "trichilemmal cysts transformed into squamous cell carcinoma" is rare.

Observation: A 70-year-old patient with 20 years' history of painless nodular scalp lesions, progressively increasing in number and size. One of these lesions, following a 6 months traumatism had increased in size and became ulcerated and bleeding. Clinical examination revealed a 7 cm ulcer-bleeding tumor of the vertex. A 12 Several nodular lesions, without functional signs without lump nodes. Cutaneous biopsy had objectified squamous cell carcinoma. Lymph node ultrasonography revealed ganglionic formations of undisputed appearance. No metastasis was identified at CT. The patient was referred for surgical treatment.

Key message: This transformation most often occurs on a pre-existing trichilemmal cyst for several months or years, as was the case for our patient. Clinically, these tumors are well limited, sometimes ulcerated. Macroscopically, they are whitish of variable size, polylobed, solid and of firm consistency. The criteria for malignancy of trichilemmal cysts are poorly defined but some authors consider that the infiltration of the stroma, the presence of metastasis, a high mitotic activity with abnormal mitoses, a marked nuclear pleomorphism and the presence of necrosis are elements in favor of malignancy. In case of ulceration, clinicians should search signs of malignancy

