



SKIN CANCER (OTHER THAN MELANOMA)

TREATMENT OF BOWEN'S DISEASE OF THE AURICLE WITH CURETTAGE AND ELECTROCOAGULATION: CASE REPORT

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Background: Bowen's disease (BD) is approximately four times more common than basal cell carcinoma in the external ear. The risk of progression to invasive squamous cell carcinoma is 2% to 5%, which implies a risk of metastases in 1.9% to 15% of cases. Surgical excision is considered the gold standard treatment for BD. Curettage associated with electrocoagulation is an effective technique which may avoid mutilations and unaesthetic results in this context. The objective of this case report is to highlight the need to individualize the treatment of each patient and to report a case in which curettage and electrocoagulation were successfully used in the treatment of external ear BD.

Observation: A 68-year-old man, with a previous history of rhinopharyngeal cancer surgery, presented with an ulcerated lesion in the inner region of the right auricle with 4 years of slow and progressive evolution. A biopsy was performed and diagnosed Bowen's Disease. Curettage and electrocoagulation were performed. The healing period was prolonged, requiring 4 months until total reepithelization of the wound. Control biopsy, performed in the fourth postoperative month, was negative for malignancy. There was no signs of recurrence after more than two years of follow-up.

Key message: This case report illustrates that curettage and electrocoagulation is a feasible technique with a high probability of cure and may be the best choice for treatment of BD of the auricle.

