SKIN CANCER (OTHER THAN MELANOMA)

TYPE C LYMPHOMATOID PAPULOSIS: BORDELINE PRESENTATION

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Background: Lymphomatoid papulosis (LyP) is a CD30+ lymphoproliferative skin disease. It has also been reported to progress to mycosis fungoides or cutaneous anaplastic large-cell lymphoma (cALCL). We report a case with atypical lesions of Type C LyP, with rapidly self-healing evolution.

Observation: 93-year-old man, otherwise healthy presented with a three month evolution history of lesions, which began in the right upper limb, and then appeared in the groin and thighs, characterized by asymptomatic erythematous-violaceous plaques of different sizes (2-12 cm) and shapes (round and oval), very firm and infiltrated at palpation. He never presented ulceration.
With the diagnosis of cutaneous infiltration by lymphoma, a punch biopsy was performed. The histophatology reveal a dermic mononuclear infiltratation that support a lymphoproliferative process. The immunohistochemistry study show: ACL +, Ki-67 +, CD20 -, CD3 -, vimentin +, CD4 +, CD8 -, CD5 +, CD30 + , EMA -, PAX5 -, CD56 -, CD34 -, MPO -.
He was derivated to hematology to complete the study, without alterations.
When the patient came back, one month after the biopsy, lesiones were involving.
With this clinical presentation plus the histophatologic and inmunohistochemistry study we make the diagnosis of type C LyP.
After one year (without any treatment) the patient has not presented new lesions, just persist a mild hyperpigmentation sequelae.

Key Mesagge: cutaneous CD30+ lymphoid proliferations represents a distinct form of T-cell lymphoma which is characterized by the morphology (large and anaplastic) and immunophenotype (CD30+) of the tumor cells. They present as a spectrum of diseases composed of clinically indolent LyP, primary cALCL, and aggressive systemic large cell lymphoma. Type C resembles ALCL with clusters and sheets of CD30+ cells in the upper dermis with no fatty tissue infiltration. Clinical-pathologic correlation and complete systemic work up is essential.