SKIN MANIFESTATIONS OF INTERNAL DISEASE

INTRAVASCULAR LYMFOMATHOSYS

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Background: It is a type of non-Hodgkin lymphoma, usually B-cell, extraordinarily rare. It is characterized by the proliferation of neoplastic cells within small vessels (capillaries, venules and arterioles) with minimal or no involvement of the adjacent parenchyma; virtually any organ can be affected, but generally respects primarily lymphoid, without expression in peripheral blood. Clinically, although it can manifest itself in a very variable way, the most common is the involvement of the central nervous system and the skin.

Observation: We present the case of a male patient, 47 years old, with a four-month history of fever, profuse sweating, marked asthenia and skin lesions disseminated to the thorax, abdomen, and upper and lower extremities characterized by violet plaques of crusted supercell and inflammatory violet nodules. He showed temporospatial disorientation without neurological focus, with a progressive decrease in the level of consciousness. General laboratory exams reported: discrete alteration of the liver function albúmin 1,8 g/l, ALT 62 U/l, AST 54 U/L, GGT 102 U/L, FA 101 U/L, anemia (Hemoglobin 7 gr/dl) and significant elevation of LDH (1783 IU). The analysis of the cefalo spinal fluid was normal, chest radiography and cranial tomography without and with contrast were both normal.
Skin biopsy was performed and the results showed intravascular obstruction of small vessels by lymphoid cells. The immunohistochemical study revealed that these cells were positive for the common leukocyte antigen and PAN-B (CD-20). The diagnosis of intravascular lymphomatosis was confirmed and we consult the oncology service for respective treatment.

Key Message: It is essential to mention that it is a disease of poor prognosis, so its early diagnosis is essential before there is a massive involvement of the central nervous system, hence the need for an accurate given that the entity is potentially curable with chemotherapy treatment.