



SKIN CANCER (OTHER THAN MELANOMA)

KAPOSI SARCOMA IN RENAL TRANSPLANT RECIPIENTS: A CASE SERIES

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Background: Among renal transplant recipients (RTR), Kaposi Sarcoma (KS) is one of the most prevalent malignancies of the skin. It is an endothelial neoplasm related to Herpes Human Virus 8 (HHV8) infection that typically presents itself as painless violaceous lesions on the skin. As a single center, our Institution (Hospital do Rim e Hipertensão) has about 10,000 RTR under active surveillance.

Observation: Consulting the electronic database (2008-2018), we identified seven cases of iatrogenic KS in RTR. Thus, we compared our data with the literature (Pubmed, Scielo, and Lilacs). The gender distribution was 5 male: 2 female, similar to the ratio outside Brazil (3:1). The age ranged from 33 to 75 years old (median 69). The skin phototype varied from II to V (mode III and IV). All RTR received a kidney from a deceased donor. The time from transplant to diagnosis of KS ranged from 6 to 101 months (median 56.5), while usually, lesions present within 2 years of transplant. The immunosuppressive regimen by the time of diagnosis was based on tacrolimus, mycophenolate sodium and prednisone (6 out of 7 patients), likewise literature state, with higher incidence in regimens based on calcineurin inhibitors. Cutaneous lesions were multiple. The most common sites of lesion were the lower limb, followed by the oral cavity and the cephalic region. Gastrointestinal dissemination was the only one recorded. Four patients' skin fragments were tested for HHV8 and were positive. The treatment options varied from resection to the conversion to mammalian target of rapamycin inhibitor (mTORi) and even radiotherapy. The lymphedema in lower limbs, also described in the literature, was frequent (57%). Only two patients deceased, but only one related to the KS.

Key message: Surveillance of RTR concerning SK: 1.new violaceous skin lesion should be submitted to biopsy; 2.especial attention to HHV8-positive RTR; 3.conversion to mTORi.

