BASAL CELL CARCINOMA IN ASSOCIATION WITH ACRODERMATITIS CHRONICA ATROPHICANS HERXHEIMER

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Abstract. A case of basal-cell carcinoma developed in the skin lesion of acrodermatitis chronica atrophicans Herxheimer is reported. Both diagnoses were histologically verified.

An ubiquitous disappearance of the pilosebaceous apparatus is a corroborative sign of this stage. The sweat glands might be invaded by the inflammatory cells. An infiltrate-free zone is often distinguishable just beneath the basal cell layer. No unequivocal proofs that the disease is primarily vascular have been presented. An atrophy of the subcutaneous tissue is observed.

A decrease and later disappearance of the inflammatory cells and a pronounced atrophy of the epidermis and dermis is characteristic of the atrophic phase.

The present paper reports on one case of acrodermatitis developing a basal cell carcinoma within the lesion.

CASE REPORT

A 59-year-old skipper with red-blush skin, paper-like and slightly wrinkled skin in areas distributed at random on both legs. The lesions had a duration of more than four years. Within such a lesion on the ventral part of the left thigh a slightly elevated tumor developed during two years. About one year after onset a conjectured scaling or crustiform appearance of the central part of the tumor developed.

A biopsy from this localization revealed a histological picture corroborative for acrodermatitis (Fig. 1). Centrally, in sections from the biopsy, a superficial basal cell carcinoma was visualized (Fig. 2). No signs of squamous cell carcinoma was observed. The tumor was excised by a surgeon.

COMMENT

The possible relation between acrodermatitis and malignancy has been discussed by several authors. Degos (3) mentions the simultaneous occurrence of visceral cancer in 14 cases of acrodermatitis chronica atrophicans.
Squamous cell carcinomas and sarcomas (1, 2, 7, 8, 11, 12, 13) in association with acrodermatitis have occasionally been described, mostly in relation to ulcers.

To our knowledge no reports on the occurrence of basal cell carcinoma within a hitherto untreated acrodermatitis lesion have been presented. The appearance of basal cell carcinomas in the transformed skin of this disease within a region treated four years earlier for squamous cell carcinomas with X-rays has been reported (4).

It is obvious that the association of squamous cell carcinoma with acrodermatitis chronica atrophicans Herxheimer is rare but does occur.

The case presented also indicates the possible association of basal cell carcinoma with untreated acrodermatitis. The authors emphasize the feasibility of remission in this tumor.
REFERENCES


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