



RECURRENT BLEEDING MASS ON BACK : A RARE PRESENTATION

Dermatology

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ABSTRACT

Basal cell carcinoma (BCC) arises most often in sun-exposed areas but does rarely occur in non-sun-exposed sites. Incidence increases with age, sun exposure and male gender. Prior tissue injury, especially sharp trauma and chronic inflammation increases the risk of BCC. We here describe a 75 years old female patient with recurrent bleeding mass. Early detection is important for optimal patient outcome.

KEYWORDS

Basaloid, pyogenic granuloma, sun exposed

Case Report

A 75 years-old female had presented to us with history of a bleeding lesion on back from last 2 years. Lesion was not painful. On examination there was a well defined mass of around 5cm x 3cm. On palpation blood started coming out of the lesion. Patient had taken treatment previously from other dermatologist with the diagnosis of pyogenic granuloma. Keeping in view the morphology skin biopsy was done with the possibility of pyogenic granulomas, SCC and BCC. On HPE, Section from the skin shows a tumour arising from the basal layer of epidermis composed of nests and fronds of basaloid cells with scant cytoplasm, ovoid nuclei, coarse chromatin and inconspicuous nuclei. Areas of ulceration noted. Focally retraction of stroma tumour interface noted. Peripheral palisading seen. Depth of invasion was 4mm. All this favouring BCC.

carcinoma of the anal region and its distinction from basaloid squamous cell carcinoma," Modern Pathology, vol. 26, no. 10, pp. 1382–1389, 2013.

DISCUSSION

Basal cell carcinoma (BCC) is the most common cutaneous malignancy and accounts for approximately 80% of all nonmelanoma skin cancers. These tumors typically arise in sun-exposed areas; rarely, they occur in nonexposed areas and have been found on the trunk, genitals, nails, axilla, nipple and feet. Areas of chronic irritation and burn areas are more likely to develop both SCCs and BCCs. It has diverse histological feature. Pigmented BCC is one of the rare forms of bcc. Human papilloma virus has no role in BCC like SCC. Treatment with surgical excision is typically curative.

CONCLUSION

Once recognized, prognosis is generally good. Although these cancers rarely metastasize, basal cell carcinoma can invade nearby structures. Early recognition is critical to optimize outcomes. Here, we describe a case of basal cell carcinoma (bleeding mass) arising in a non-sun-exposed area like back to alert clinicians to consider BCC in the differential diagnosis

Acknowledgement

We would like to thank patient who agreed to have her case reported

Declaration of patient consent

We certify that we have obtained patient consent. Patient have given consent for images and other clinical information to be reported in the journal. The patient understands that their name and initials will not be published and due efforts will be made to conceal their identity, but anonymity can not be guaranteed.

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Conflicts of interest

Nil

REFERENCES

1. E. Gibson and I. Ahmed, "Perianal and genital basal cell carcinoma: a clinicopathologic review of 51 cases," *Journal of the American Academy of Dermatology*, vol. 45, no. 1, pp. 68–71, 2001.
2. C. A. Paterson, T. M. Young-Fadok, and R. R. Dozois, "Basal cell carcinoma of the perianal region: 20-year experience," *Diseases of the Colon and Rectum*, vol. 42, no. 9, pp. 1200–1202, 1999.
3. D. T. Patil, J. R. Goldblum, and S. D. Billings, "Clinicopathological analysis of basal cell