



SKIN CANCER (OTHER THAN MELANOMA)

SQUAM CELL CARCINOMA OF ATYPICAL LOCALIZATION

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Background: Squamous cell carcinoma is the second most common skin cancer after basal cell carcinoma. Its incidence increases over time. It occurs on exposed photo areas, but can also appear in hidden photo areas. We report cases of 2 patients with squamous cell carcinoma of the buttocks de novo.

Observation: This is Mr K.M, 40 years old, with no significant pathological antecedents. He has had for 2 years an erythematous lesion of the left buttock rapidly increasing in size becoming ulcerative and hemorrhagic. The dermatological examination revealed the presence of an ulcer-budding tumor invading all the well-defined left buttocks with irregular contours necrotic surface in place and fibrinous by others with pus. The remainder of the somatic examination showed bilateral supra-centimeter inguinal lymphadenopathy fixed in relation to the deep plane. Histology favored a well-differentiated, mature and infiltrating squamous cell carcinoma. The extension assessment revealed a locally advanced left gluteal soft tissue tumor process, with inguinal lymph node dissection and ipsilateral external iliac bone involvement. The proposed treatment was radiotherapy.

Key message: The peculiarity of our observation resides in the young age of the patients, the unusual localization, the de novo occurrence, and the rapidly evolutive character of the carcinoma. The clinical picture prompted us to look for another primitive localization, but the para-clinical examinations did not reveal it. To our knowledge, no case of epidermoid carcinoma de novo at the level of the buttocks has been published in the literature and the few reported cases have occurred on a papillifera syringocystadoma, which may be the case of our patients. Treatment must be early to avoid metastatic progression, however, the rapidly evolving nature of these carcinomas makes management difficult

