



SKIN CANCER (OTHER THAN MELANOMA)

## CHALLENGING PRESENTATIONS OF KERATOACANTHOMA TREATED WITH INTRALESIONAL METHOTREXATE

*Maria Gabriela Moran Cardenas<sup>(1)</sup> - Jose Manuel Moran Cardenas<sup>(2)</sup> - Amaya Stein Andonegui<sup>(3)</sup> - Giacomo Minuzzi Acetta<sup>(3)</sup> - Francisco Pereira Rudolph<sup>(3)</sup>*

*Universidad De Santiago De Chile, Dermatology, Las Condes, Chile<sup>(1)</sup> - Universidad Finis Terrae, Dermatology, Santiago, Chile<sup>(2)</sup> - Universidad De Santiago De Chile, Dermatology, Santiago, Chile<sup>(3)</sup>*

Although intralesional methotrexate (MTX) is an effective, nonsurgical treatment of keratoacanthoma (KA), there have not been many reports of MTX treatment for KA in Chile. Keratoacanthoma (KA), is a rapidly growing cutaneous neoplasm derived from the hair follicle with a tendency toward spontaneous regression and histopathologic similarity to squamous cell carcinoma (SCC). Because KA can be easily misdiagnosed as SCC, surgery is considered the treatment of choice. However, an excision can cause significant cosmetic or functional problems, because of the surgical defects resulting from the size or location of the tumor and, or because in some cases the patient has elevated risk of complications during surgery or even denied surgery pass.

We present 4 cases of KA treated with Intralesional MTX. The efficacy was evaluated based on the physician assessment. Obvious improvement was observed after 2 to 8 weeks of application and the lesions were almost cleared leaving scars after 3 to 11 weeks.

These results show that intralesional MTX can be an effective and safe non-operative treatment modality for selected cases of KA.

