An 88-year-old woman was referred to our department because of leukocytosis in November 1996. The white blood cell count was 112,600/μl with 97% small lymphocytes. The lymphocytes were positive for CD19, CD20, CD23 and CD5. She was diagnosed as chronic lymphocytic leukemia (CLL) with Rai classification III, and had been followed without chemotherapy for 5 years. In December 2001, she noticed redness and swelling of the nail folds of all fingers (Fig. 1A). She felt tenderness at these sites. The biopsy of the skin lesion showed abnormal lymphocytes infiltrating the dermis and subcutaneous tissue (Fig. 1B). These cells were morphologically similar to peripheral lymphocytes and were positive for CD20, CD23, CD79a and bcl-2, and negative for CD5. This suggests skin infiltration of CLL. Seasonal fluctuation of the nail folds swelling was observed, that is amelioration in the summer and aggravation in the winter. The skin infiltration of CLL as observed in this case is rare. To our knowledge, there has been no report on skin infiltration of CLL in Japan.

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Figure 1. A: Redness and swelling of patient’s fingers and thumbs. B: The biopsy of the skin showed abnormal lymphocytes infiltrating the dermis and subcutaneous tissue (HE stain, ×400).