Sclerodermoid Type of Skin Metastasis from Lung Cancer

Byoung Jun Lee¹, Jae Soo Koh², Cheol Hyeon Kim¹ and Jae Cheol Lee¹

Key words: lung cancer, skin metastasis, sclerodermoid type

(Inter Med 49: 2365-2366, 2010)
(DOI: 10.2169/internalmedicine.49.3977)

A 61-year-old man complained of slowly progressive dark pigmentation and telangiectasia with fibrotic change of the skin on the anterior chest for over 6 months. He was being followed-up after treatment for primary lung adenocarcinoma (Picture 1, arrow) with brain metastasis (cT2aN3M1, stage IV). The skin lesion was mostly confined to the area of the anterior chest below the neck. It was slightly irregular and hard on palpation without any local heat, oozing or nodular parts (Picture 2A). Skin biopsy revealed diffuse infiltrating tumor cells into the dermis with mild sclerotic change (H&E; Picture 2B, immunostaining for CK7; Picture 2C). TTF-1 staining was positive suggesting lung origin.

Skin metastasis from visceral malignancy can be classified into nodular, inflammatory, fibrotic, and sclerodermoid types (1). Almost all patients with cutaneous metastases in lung cancer have presented with solitary or multiple nodular types that may have resulted from hematogeneous spread (2). This is the first case of sclerodermoid type of cutaneous metastasis from lung cancer.

References


¹Department of Internal Medicine, Korea Cancer Center Hospital, Nowon-gu, Korea and ²Department of Pathology, Korea Cancer Center Hospital, Nowon-gu, Korea

Received for publication May 24, 2010; Accepted for publication August 20, 2010

Correspondence to Dr. Jae Cheol Lee, jcle@cch.re.kr