A 94-year-old man recognized an irregular black plaque on his left forearm, which rapidly developed over a 2-month period. A physical examination revealed that a non-palpable black plaque with irregular borders covered almost all of his left arm (Picture), and his left axillary lymph nodes were swollen. Two years previously, he had undergone palliative surgical resection for black plaque on his left 4th finger (due to old age), and histological diagnosis of malignant melanoma had been made. Computed tomography revealed liver metastasis. We diagnosed his skin plaque as in transit metastasis of malignant melanoma, and anti-PD-L1 antibody treatment was initiated.

Various therapeutic options for malignant melanoma have recently been developed; however, this malignancy has an unfavorable clinical behavior. Despite administering anti-PD-L1 antibodies 5 times, the tumor continued to increase in size without nodule or tumor formation, and liver dysfunction was also observed. The patient died of multi-organ failure with metastatic lesions.

The authors state that they have no Conflict of Interest (COI).

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