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LENTIGO MALIGNA OF THE FACE
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INTRODUCTION: Dermoscopy is a noninvasive technique for the diagnosis of pigmented skin lesions. When performing isolated physical examination, clinicians may do not recognize early-stage lentigo maligna (LM), because of the absence of clinical features. Dermoscopy is an important tool in its evaluation. We present three cases of LM. CASE REPORTS: 1: A 71-year-old woman presented with a pigmented, irregular spot on the left temporal region with 4 years duration. Clinical examination revealed an asymmetrical and irregular pigmented three-colored lesion, 2,8 x 3,0 cm. Dermoscopic examination showed asymmetry on color distribution, erythema, hair follicles obliteration and a blue-white veil. Histopathology confirmed the diagnosis of LM. 2: A 78-year-old man presented with a roundish pigmented lesion on his forehead for 20 years. On examination, a dark-brown pigmented lesion, slightly asymmetrical, 1 cm in diameter. Dermoscopy showed assymetrical pigmented network, globules, streaks, structureless areas and blue-white veil. The histopathological diagnosis was LM. 3: A 74-year-old man reported a spot on the dorsum of the nose with a 3-year history. Examination showed a brownish lesion, 1 cm, homogenous color. Dermoscopy showed asymmetrical pigmentation, and the incisional biopsy revealed a LM. DISCUSSION: In some cases, isolated clinical evaluation lead clinicians to miss the diagnosis of LM. In contrast, combined clinical and dermoscopic examinations help them to have a better evaluation of these lesions, leading to an early diagnosis and management, resulting in a better prognosis and aesthetic result. The main purpose of this report is to reinforce the importance, for dermatologists, to do not exclude the diagnosis of malignancy when examining a reassuringly ABCD-negative pigmented lesion of the face, without furthering the examination with dermoscopy, in order to detect features of malignancy not visible on clinical examination.