Microscopic Mystery
Dermatopathology with Clinical Correlation

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I do not have any relevant relationships with industry
Case 1 - Congenital ulcer

- 3 day old newborn, transferred intubated from OSH for respiratory distress
- Ulcer on back noted at birth
- HSV PCR negative
Congenital Self-healing Reticulohistiocytosis

- Respiratory distress resolved, dx transient tachypnea of the newborn
- Skeletal survey negative
- Ulcer healed with atrophic scar
LCH – Old Classification

- Eosinophilic Granuloma
- Hashimoto-Pritzker
  - Congenital Self Healing Reticulohistiocytosis
- Hand-Schuller-Christian
  - Osteolytic lesions, exophthalmos, diabetes insipidus
- Letterer-Siwe
  - Disseminated disease, often in toddlers
  - “Recalcitrant seborrheic dermatitis”
  - Often aggressive
LCH

- Single system
  - Spontaneous regression in children
  - May require therapy in adults

- Multisystem
  - Aggressive
  - Chronic/reactivating
Langerhans Cell Histiocytosis Mimicking Malignant Melanoma: A Diagnostic Pitfall

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What else does LCH have in common with melanoma?

- **BRAF V600E** mutation (over 50%)
- MEK/ERK activation in most or all
History

- 43 y.o man with lesion on ventral penis
- Reports 2 year history of a growth at a site of childhood “trauma”
- Growth recently enlarged and associated with left groin “swelling”
Differential diagnosis

- Adenocarcinoma
- “Pseudoglandular” squamous cell carcinoma
- SCC with entrapped benign skin appendages
- Adenosquamous carcinoma

- Primary vs metastatic tumor
HPV + Adenosquamous Carcinoma

- FNA of groin mass c/w carcinoma, also p16+
- PET/CT highlighted hypermetabolic tumor on penis, left groin and left inguinal lymph nodes
- Subsequent excision of groin mass also identified adenosquamous carcinoma
Adenosquamous Carcinoma

- Rare primary cutaneous tumor, most commonly on the head and neck
- Case reports suggest aggressive behavior and poor prognosis
- Few reports of primary ASC of the penis, none with reported HPV status
Comment on HPV

- Primary cutaneous adenosquamous carcinoma (ASC) has not previously been associated with HPV
- HPV-associated ASC (and adenocarcinoma) does occur in the endocervical canal where there is transition from squamous to glandular mucosa