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RESEARCH ARTICLE

A CASE OF ASSOCIATION OF CARCINOMA EN CUIRASSE AND CARCINOMA ERYSIPELOIDES OF BREAST CARCINOMA

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Abstract

Introduction:-

Metastasis is defined as a neoplastic lesion arising from another neoplasm . Cutaneous metastases account for 0.7-9% of all metastases and may be the first evidence of internal malignancy or a sign of recurrence and is considered a grave prognostic sign. For breat carcinoma the carcinoma cells disseminate along tissue spaces or through lymphatics. Usually it appears in cases of local recurrence aier mastectomy , Our case is rare in the context that the first presenting feature of our patient was initially diagnosed clinically as erysipelas.

Case report :

A 39 -year-old woman complained of progressive, painful, reddish lesions with thickness of the overlying skin over the chest, of 4 weeks duration. She gave history of carcinoma breast 3 years back and review of her previous medical records showed invasive ductal carcinoma left breast, which was treated with modified radical mastectomy and four cycles of radiotherapy. Metastatic work-up at that point was negative. Clinical examination revealed indurated erythematous plaques with well-defined margins and numerous firms to hard erythematous papules andfew indurated coalescent plaques were present in the dermatomal distribution. There was tenderness and local rise in temperature over the lesions . The routine laboratory examination including hemogramma , blood ionogramma and the C-reactive protein were within the normal limits . a skin punch biopsy substantiated this, revealing focal epidermotropism of lymphocytes in the epidermis with the dermis being replaced by scattered single anaplastic cells and lymphatic emboli of large malignant cells . She is now on chemotherapy for the metastatic disease .

Discusion:-

Here, we present our case of metastatic carcinoma breast with a rare assocaition of carcinoma en cuirasse appareted as a sign of recurrence, and the second rarer variant, carcinoma erysipeloides, which occurred late in the course of improperly treated disease.

Carcinoma en cuirasse is a very rare condition. En cuirasse metastatic carcinoma is characterized by diffuse morphea- like induration of skin. It is a fibrotic process resembling a encasement in an armour of a cuirassier(1). It evolves from firm papules and nodules overlying an erythematous base to a sclerodermoid plaque. This may be explained on the basis of perineural involvement of nerves. Induration could be related to chronic lymphatic obstruction(2).

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Carcinoma erysipeloides, also known as inflammatory skin metastasis, is a relatively rare variant of metastatic disease, accounting for less than 1% of the total metastases. It has a grave prognosis due to the likelihood of disseminated metastasis. Although it mimics erysipelas, the clues to diagnosis are absence of fever and chills along with negative bacterial cultures and absence of leukocytosis. The clinical picture is due to the spread of the metastatic cells along the subepidermal and subcutaneous lymphatics leading to blockade of the lymph ducts(3).

The prognosis of a patient with cutaneous metastasis depends primarily on the pathology and biological behavior of the primary neoplasm and its response to treatment. In breast carcinoma with skin metastasis presents as advanced tumour and show very poor prognosis, hence skin duration of long duration (months to years) are to be thoroughly investigated particularly in elderly patients(4).

Conclusion:-

In conclusion, our case shows that the inflammatory manifestation or induration , which is a marker of tumor recurrence in a patient with breast carcinoma, suggests that immediate check-up is needed for early detection of recurrence of malignancy even if the patient has undergone chemotherapy.

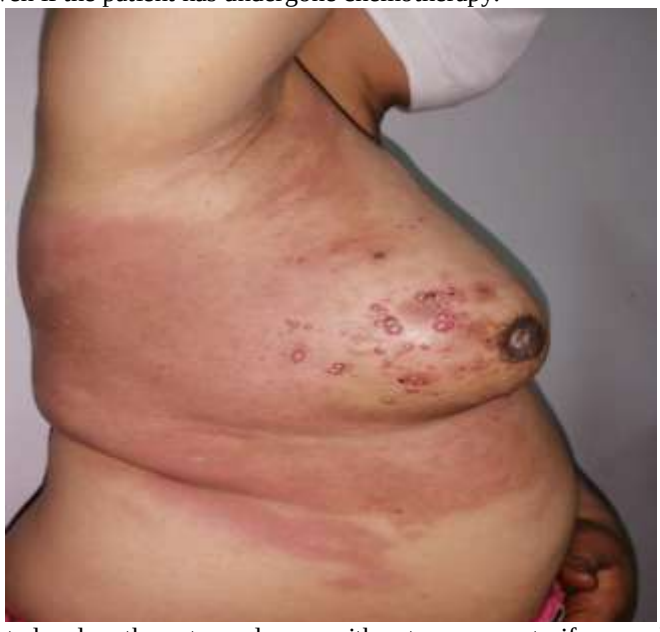

Figure1:- Indurated and erythematous plaques with cutaneous zosteriform nodular metastases.

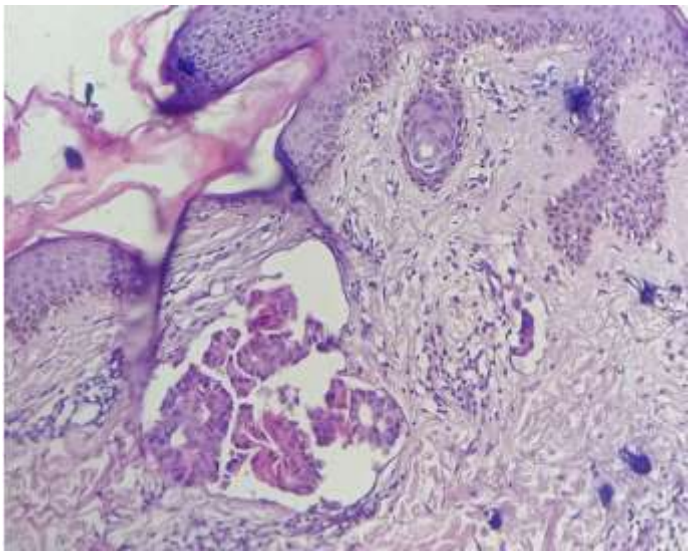

Figure 2:- Histopathology of malignant epithelial cells.

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