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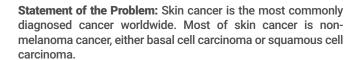
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ANOGENITAL SQUAMOUS CELL CARCINOMA IN NEGLECTED PATIENT AND PRIMARY CARE

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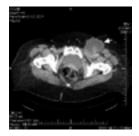
Methodology & Theoretical Orientation: Screening for skin cancer showed insufficient screening examination by a physician as well as by patient. Gynecologist for genital wart with podophyllotoxin cream treated a Caucasian 56-years old female patient. She did not achieve complete response and therefore she has interrupted the therapy and the collaboration with the gynecologist.

Findings: At the time of evaluation the lesion had a size of man's palm in anogenital region and showed characteristic features of neoplasm. The regional lymph nodes have produced infiltrated painful bubo. PCR analysis for HPV proved negative. Histopathology revealed well-differentiated squamous cell keratinizing carcinoma from the tumor as well as from the regional lymph node packet. Staging computed tomography scans proved negative and pelvis scans disclosed regional lymphadenopathy underlying the tumor. Palliative radiation therapy (by linear accelerator) was administered for the oversize tumor to the total TD 50.0Gy. The patient died six months after diagnostic assessment from the cardio-respiratory failure. Staging computed tomography before her death did not disclose distinct metastases in her inner organs. Well-differentiated squamous cell keratinizing carcinoma could be growing endophytically affecting the underlying adipose tissue and musculature, with spreading into the regional lymph node. The rate of metastasis into inner organs seems to vary according to the aggressiveness and metastatic behavior of each SCC.

Conclusion & Significance: The case report calls for attention to the importance of collaboration among various specialists



assisting with the diagnosis and management of skin neoplasm. Education in screening for skin cancer is important in preventive primary care.



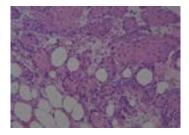


Fig.1: CT scan showed necrotic enlarged packing of lymph nodes in the left groin (arrow-head).

Fig.2: Squamous cell carcinoma infiltrates adipose tissue (hematoxylin and eosin, x250)

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Biography

Danka Svecova completed her MD and PhD in Dermatology. Currently, she is a Professor of Dermatovenerology, Head of Bullous Disorders Unit in Department of Dermatovenerology at University Hospital and Faculty of Medicine at Comenius University in Bratislava, Slovakia. She is a board member of Division Committee for Dermatovenerology and Immunology for PhD. She is a member of committee for Probation of Specialization for Dermatovenerology at Comenius University in Bratislava and University of J.P. Safarik in Kosice. At Hokkaido University in Sapporo, Japan, she participated in research on skin allergology and immunology under the supervision of Professor Akira Ohkawara. She held several grant projects on fungal infection, therapy of psoriasis, borreliosis immunomodulatory and anti-inflammatory efficacy of normal polyphenols, immunogenetic determination to psoriasis vulgaris and pemphigus vulgaris, clinical trial of anti-IL17A/F bispecific nano body in psoriasis vulgaris (multicentric European study), Genome Wide Association Study (GWAS) on pemphigus vulgaris (multicentric study).

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