Multiple Cutaneous Squamous Cell Carcinomas Arising in Several Body Areas Except for the Face

Jun Sik Kim1, Young Ji Park1, Nam Gyun Kim1, Yoon Jung Lee2, Bong Hoi Choi3, Kyung Suk Lee

1Department of Plastic and Reconstructive Surgery, Institute of Health Sciences, College of Medicine and Hospital, Gyeongsang National University, Jinju; 2Department of Plastic and Reconstructive Surgery, Gyeongsang National University Changwon Hospital, Changwon; 3Department of Nuclear Medicine and Molecular Imaging, Gyeongsang National University Hospital, Jinju, Korea

Correspondence: Kyung Suk Lee
Department of Plastic and Reconstructive Surgery, Institute of Health Sciences, College of Medicine and Hospital, Gyeongsang National University, 79 Gangnam-ro, Jinju 52727, Korea
Tel: +82-55-750-8131, Fax: +82-55-758-6240
E-mail: opensound@hanmail.net

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Cutaneous squamous cell carcinoma (SCC) is the second most common skin cancer among primary malignant tumors occurring on the skin [1]. Exposure to ultraviolet light is well known to be the most common causative factor of cutaneous SCC [2]. Approximately 80%–90% of cutaneous SCCs have been reported to occur in the head and neck area [3].

We report a rare case, in which a patient who was diagnosed with SCC on the left foot exhibited multiple SCC lesions throughout the body, but not on the face, despite not having any other risk factors.

A 62-year-old male patient visited our hospital with an ulcerative wound in the left foot that had been present for approximately 6 months (Fig. 1). Although he had no risk factors for skin cancer, he was diagnosed with SCC through a biopsy. We overlooked searching for lesions on other parts of the body because he did not have any specific symptoms or discomfort. Eight months after surgery, SCC recurrence was observed by magnetic resonance imaging on the lateral area of the left foot. A whole-body positron emission tomography-computed tomography scan was performed, and hypermetabolic lesions were found on the lateral aspect of the left foot, the left great toe, and the left lower abdomen. At that point, a physical examination was performed from head to toe. In this examination, 0.3- to 1.5-cm skin lesions were found in each major area of the body, except for the patient’s face and neck (5 sites on the trunk and 13 sites on the legs) (Figs. 2, 3).
3). All masses were excised and found to be SCC or Bowen disease. Since patients can easily overlook skin cancers, a physical examination should always be meticulously performed.

Conflict of Interest

No potential conflict of interest relevant to this article was reported.

Patient Consent

The patient provided written informed consent for the publication and the use of their images.

References


The Effect of Hyperbaric Oxygen Therapy on a Large Composite Graft in an Ear Amputated by a Human Bite

Yongsik Park, Jae Young Cho

Department of Plastic and Reconstructive Surgery, Sanggye Paik Hospital, Inje University College of Medicine, Seoul, Korea

Correspondence: Jayoung Cho
Department of Plastic and Reconstructive Surgery, Sanggye Paik Hospital, Inje University College of Medicine, 1342 Dongil-ro, Nowon-gu, Seoul 01757, Korea
Tel: +82-2-950-1048, Fax: +82-2-932-6373
E-mail: jilijy2756@naver.com

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Traumatic amputation of the ear helix is relatively a rare occurrence. Various reconstruction techniques have been reported for this condition [1]. We present the case of a 41-year-old female patient who sustained a large traumatic amputation of the ear helix due to a human bite. Composite graft surgery was performed with adjunctive hyperbaric oxygen therapy (HBOT). The graft successfully survived, with favorable cosmetic results.

A 41-year-old female patient presented to our emergency center with a partially amputated right ear helix (Fig. 1). Due to a human bite injury, the helix was irregularly amputated, with the cartilage exposed. The amputated ear helix measured 4 × 3 cm. Reconstructive surgery was performed immediately under general anesthesia. The vascular status of the amputated ear was evaluated; however, due to the nature of its avulsion, there were no suitable arterial vessels. After debridement of the wound margin and rugged cartilage, a composite graft of the amputated helix was performed. Adjunctive HBOT was applied to enhance the reperfusion of the wound and for infection control over the course of 7 days. A piece of plastic bag was placed with an oxygen tube connected around the wound. We sealed the plastic bag around the wound to prevent air leakage (Fig. 2). Many holes were made by needles in the sealed plastic bag around...