

Atypical Leg Ulcer in an Elderly Patient

Úlcera de Perna Atípica em Doente Idoso

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Palavras-chave: Idoso; Linfoma Difuso de Grandes Células B/diagnóstico por imagem; Neoplasias da Pele; Perna; Úlcera de Perna/diagnóstico por imagem



Figure 1 – Ulcerated circular plaque with fibrinous base on the distal left leg measuring 5 x 5 cm

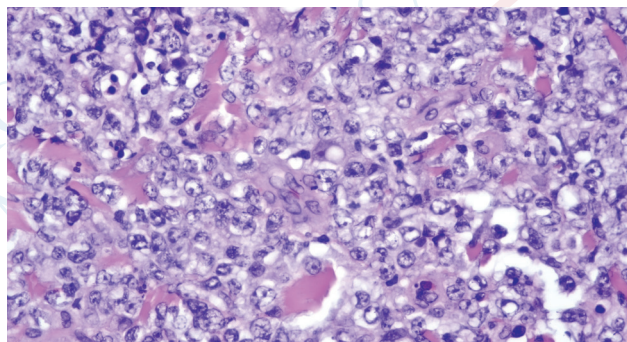


Figure 2 – Histopathology (H&E 400x) showing atypical large lymphocytes with pale cytoplasm. Immunohistochemistry was diffusely positive for CD20, Bcl2, MUM1, and Bcl6; and negative for CD3, CD10, CD30, CD56, and EBER (not displayed)

An 85-year-old white male presented with a three-month history of a painful ulcerated plaque with 5 x 5 cm on the left leg unresponsive to wound care and oral antibiotics. The lesion was indurated with erythematous borders, central ulceration, and slight malodorous discharge (Fig. 1).

The skin biopsy revealed a dense intradermal infiltrate of large lymphoid cells (Fig. 2) positive for CD20, Bcl2, Bcl6 and MUM1. Whole-body positron emission tomography (PET) and computerized tomography (CT) scans excluded other lesions. Bone marrow biopsy and blood tests were normal.

The patient was diagnosed with primary cutaneous large B-cell lymphoma, leg type (PCLB, LT), and was treated with six cycles of reduced dose cyclophosphamide, doxorubicin, vincristine, and prednisolone plus rituximab (R-mini-CHOP) every three weeks, resulting in complete healing and no significant adverse effects after one year.

Primary cutaneous large B-cell lymphoma, leg type, is a rare aggressive lymphoma with a poor prognosis, typically affecting elderly patients.¹ Early diagnosis and treatment are crucial.² Physicians should consider dermatology referral for atypical leg ulcers.³

AUTHOR CONTRIBUTIONS

KS, JT: Study design, data collection, literature search and writing of the manuscript.

JC: Data collection, literature search, writing and critical review of the manuscript.

All authors approved the final version to be published.

PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association updated in 2013.

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DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

PATIENT CONSENT

Obtained.

COMPETING INTERESTS

The authors have declared that no competing interests exist.

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