

Giant neglected Bowen's disease lesion treated successfully with topical 5-fluorouracil

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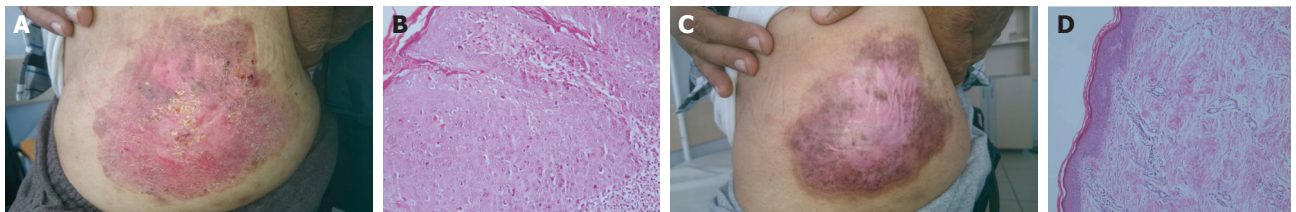


FIGURE 1. (A) Pretreatment appearance of giant plaque lesion. (B) Full thickness atypia in the epidermis, a loss of polarity, dyskeratotic cells (HE x200). (C) Posttreatment appearance of giant plaque lesion. (D) Disappearance of atypia and mild chronic inflammation (HE x10).

Bowen's disease is in situ squamous carcinoma of the skin, mostly affecting sun-exposed areas of the body. There are many options in the treatment of Bowen's disease, with varying success rates. Five-fluorouracil (5-FU) inhibits DNA synthesis and causes death of tumor cells by targeting rapidly proliferating cells. Topical 5-FU has been used effectively in the treatment of Bowen's disease. The current report describes a case of giant neglected Bowen's disease lesion in a male patient, which was successfully treated with 5-fluorouracil therapy.

A 62-year-old male patient presented at our clinic complaining of erythema and scaling. The patient had lesion that had enlarged over course of 7 years. Dermatological examination revealed infiltrative red-brown plaque with oval-round shape and well-defined and irregular margins on left lateral side of the body, measuring 13x13 cm in size with patchy crust and scaling (Figure 1A). Histopathological examination of punch biopsy material demonstrated

disruption of polarity in all layers of epidermis, mild-moderate atypia, multiple dyskeratotic cells, increased mitotic activity, and moderate-severe mononuclear infiltration in the upper layer of dermis. Integrity of basement membrane was preserved without invasion (Figure 1B). The patient was diagnosed with Bowen's disease and treatment with topical 5-FU 5% applied twice daily was initiated. Skin ulcer developed at the site of plaque lesion 1 month after initiation of therapy, and therefore therapy was discontinued. Two months after cessation of therapy, infiltrated plaque had disappeared and lesion showed near-complete regression (Figure 1C). Skin biopsy materials obtained from 3 different areas at the site of plaque lesion 1 year after therapy indicated that epidermal atypia had completely disappeared, polarity had been restored, and there was no finding in favor of Bowen's disease (Figure 1D). Clinicians should not overlook effective nonsurgical treatment methods, such as topical 5-FU, in cases of Bowen's disease.



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