Dermatopathology
Review Session Part 15

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Pathology Inc.
Nodular Hidradenoma
Histopathology

- Nodular and cystic dermal proliferation
- Squamous cells with clear cell changes
- Hyalinization around BV
- Rule out clear cell tumors-mets, glomus tumor
Metastatic Malignant Melanoma
Histopathology

- Clinical history-rule out regressed lesion
- May require IPOX confirmation, esp. in amelanotic cases
- ?Primary soft tissue melanoma
Desmoplastic Malignant Melanoma
Histopathology

- Spindle cell proliferation extending deeply throughout dermis
- Myxoid background
- May have collections of chronic inflammatory cells
- Cytologic atypia variable
- Melanin pigment usually absent
- Junctional melanocytic proliferation variable
- Caution with IPOX
Nevus Lipomatosus
Histopathology

- Papillary dermal collection of mature adipose tissue
- Epidermal papillomatosis
- Clinical correlation
- Rule out dermal atrophy
Drug Hypersensitivity
Histopathology

- No specific histopathology
- With numerous eosinophils, rule out urticarial phase of pemphigoid or pemphigus
- Rule out hypersensitivity rxns
- Rule out lymphomatoid drug rxn
Squamous Cell Carcinoma
Histopathology

- Invasive nests of squamous cells
- Squamous pearl formation dependent upon degree of differentiation
- Rule our lymphovascular invasion
- Differentiate histologic subtypes
Keratin Granuloma
Histopathology

- Keratin granulomas with foreign body giant cell reaction
- Cholesterol clefts
- May have dystrophic calcifications
- Very common reaction - rule out adjacent malignancies
Schwannoma (Neurilemmoma)
Histopathology

- Mixture of Antoni A and B
- Verocay bodies
- Hyalinization around vessels
- Rare in skin
Granuloma Annulare
Histopathology

- Superficial and deep PV and interstitial mixed dermatitis
- Mucinous degeneration of collagen
- Rare giant cells
- Interstitial vs. granulomatous variant
- Beware MF with GA fx