Dermatopathology
Slide Review-Part 16

Paul K. Shitabata, M.D.
Dermatopathology Institute
Lichen Amyloidosis
Pearls

- Hyalin deposits at dermal-epidermal junction
- Evidence of resolving interface dermatitis
- Variable staining for Congo Red
Pilar Sheath Acanthoma
Pearls

- Epidermal cyst with exuberant epithelial proliferation
- No atypia
- Deep invagination into dermis
- DDX
  - EIC
  - Dilated Pore of Winer
Eruptive Xanthoma
Pearls

- Nodular and diffuse proliferation of histiocytes
- Foamy vacuolated cytoplasm
- No cytologic atypia
Verrucous Epidermal Cyst
Pearls

- Epithelial cyst lined by verruciform changes
- Typical verruca vulgaris cytology
- Compact laminated keratin within cyst
Tumoral Melanosis
Histopathology

- Nodular collection of melanophages
- Bland cytological appearance
- May need to bleach sections to differentiate from malignant melanoma
Metastatic Melanoma to the Skin
Histopathology

- Bottom heavy distribution of malignant melanocytes with minimal to absent epidermal or junctional involvement (Opposite of primary cutaneous melanomas)
Collagenous Fibroma
(Desmoplastic Fibroblastoma)
Pearls

- Nodular proliferation of bland spindle cells in a hypocellular background
- Stroma may have increased mucin
- DDX: Fibromatosis
DFSP with DF Features
Pearls

- Low power architecture shows characteristic “honey-comb” entrapment of adipose tissue by spindle cells
- Beware superficial mimics with epidermal hyperplasia and sparse cellularity
- Consider Factor 13a and CD34 to distinguish