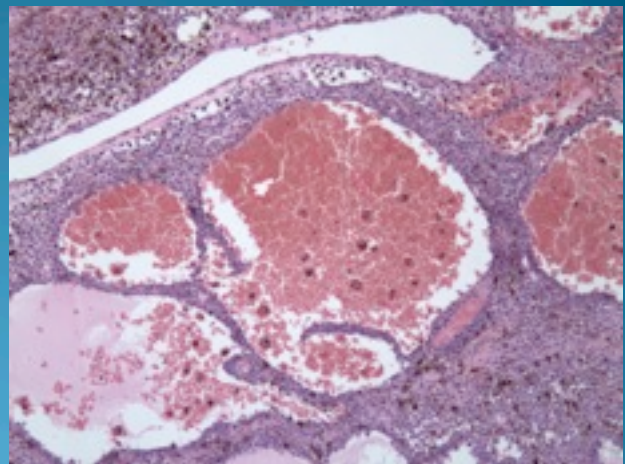
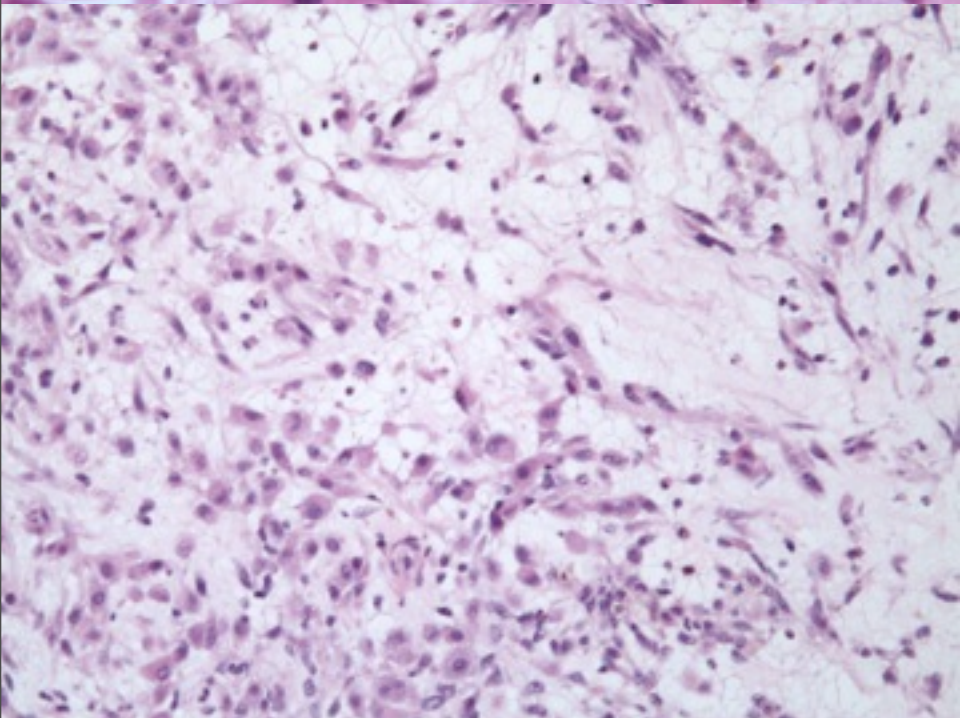
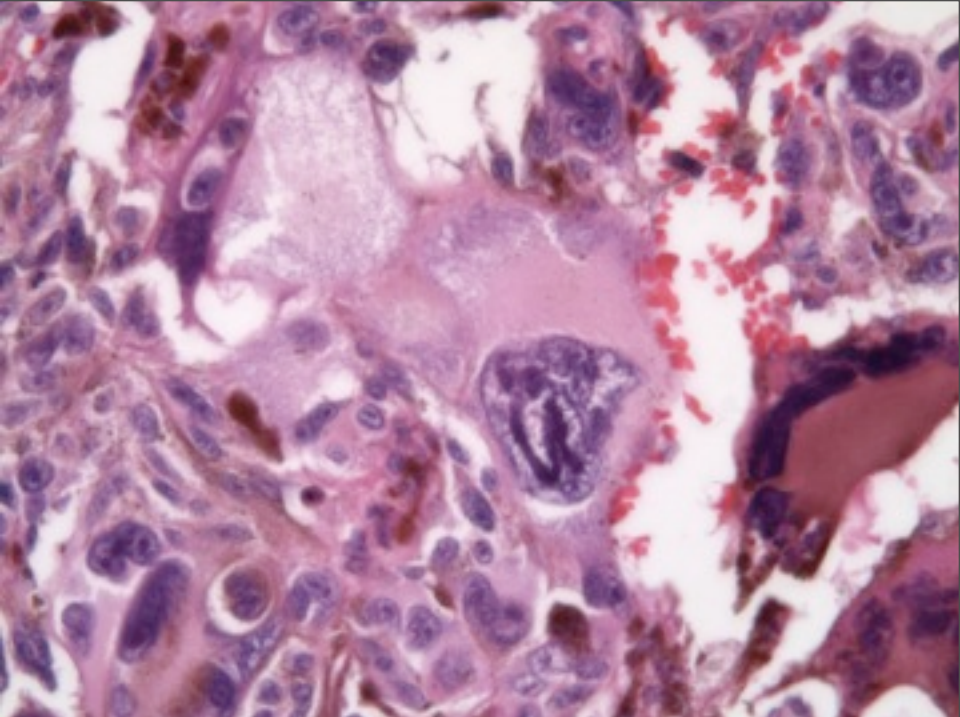
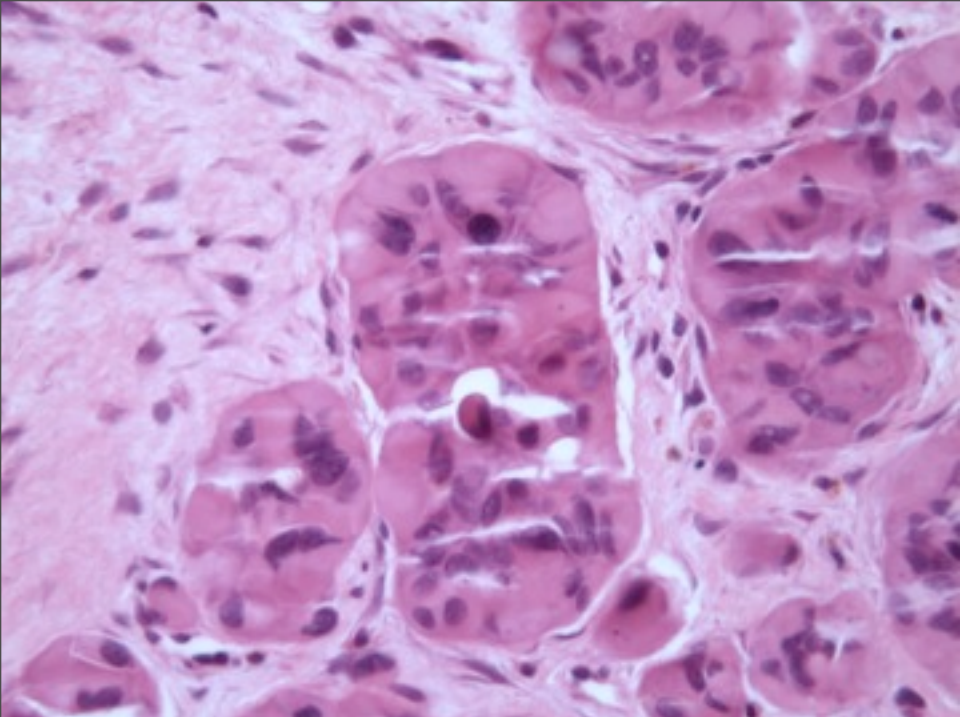
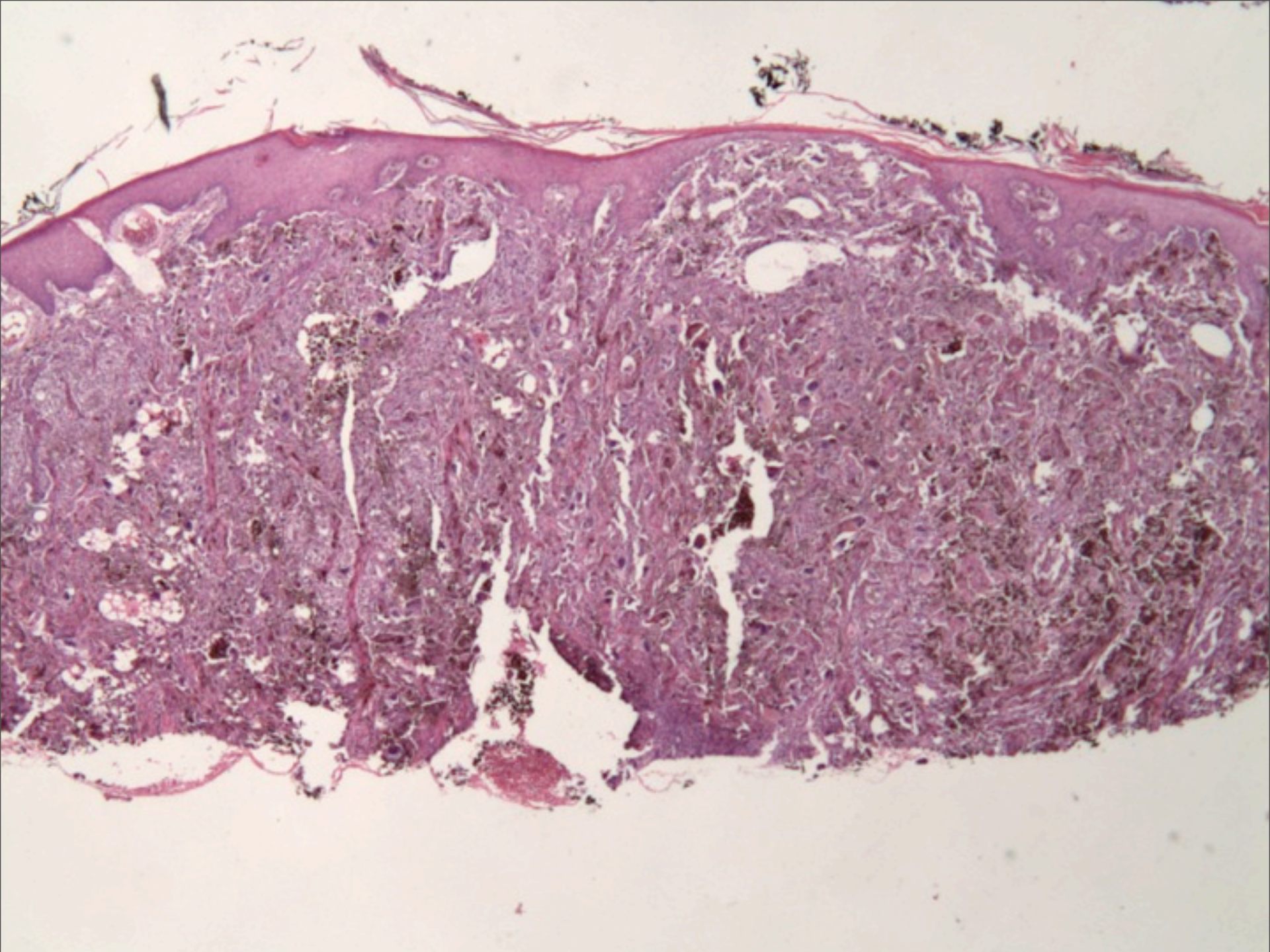


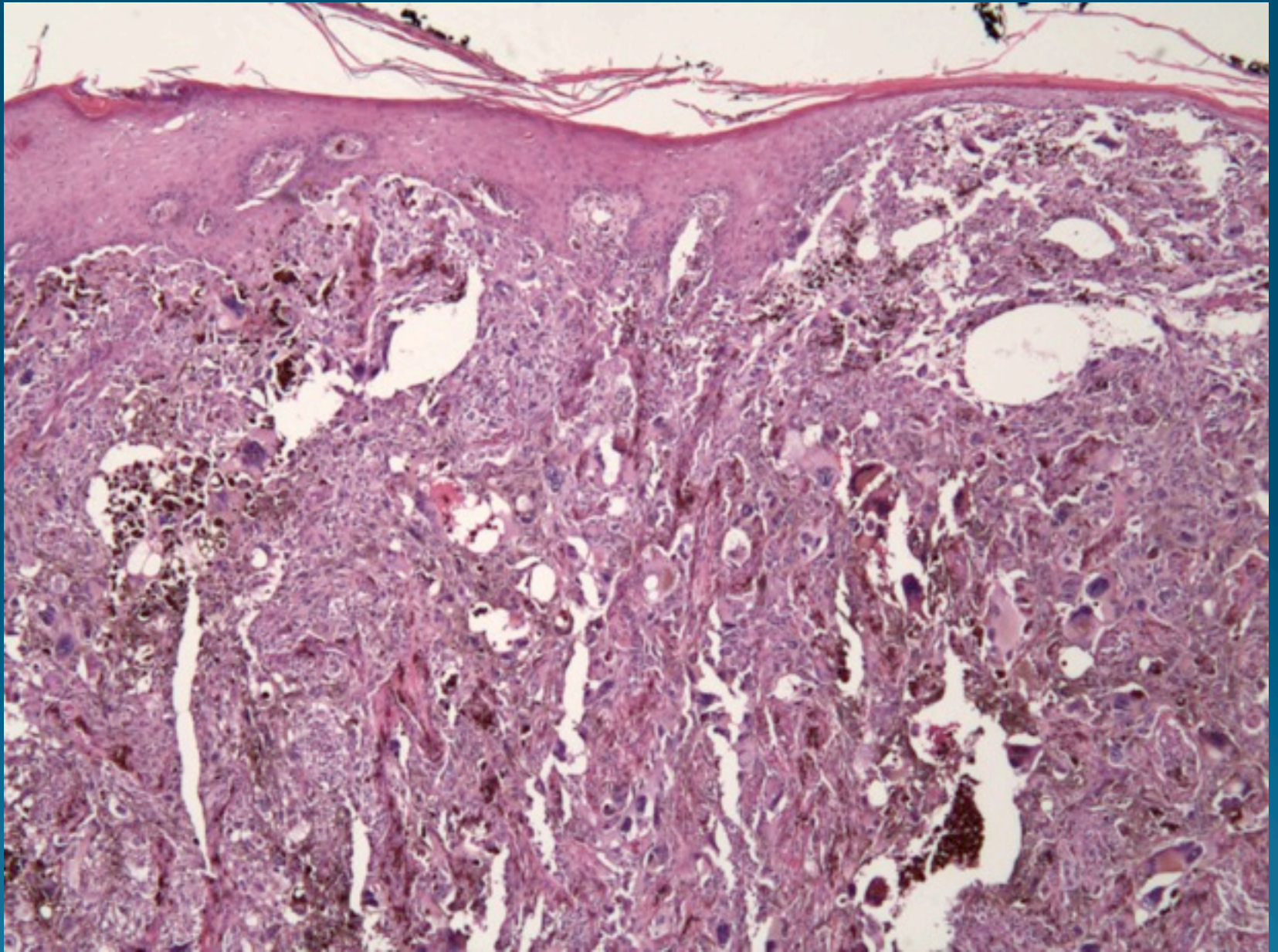
# This is a Melanoma? Unusual Histologic Variants from the Great Mimic!

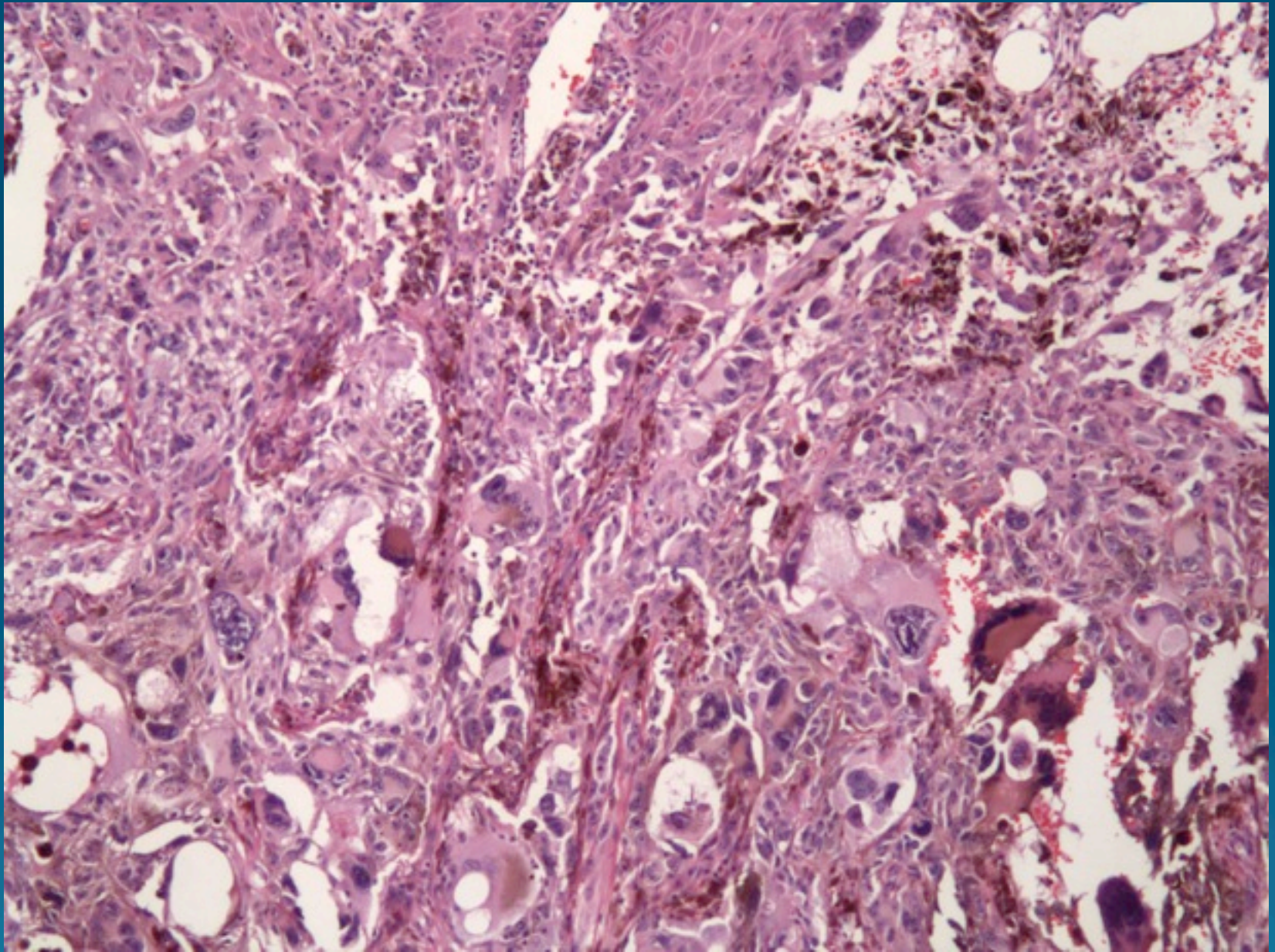
Paul K. Shitabata, M.D.  
Dermatopathology Institute  
Torrance, CA

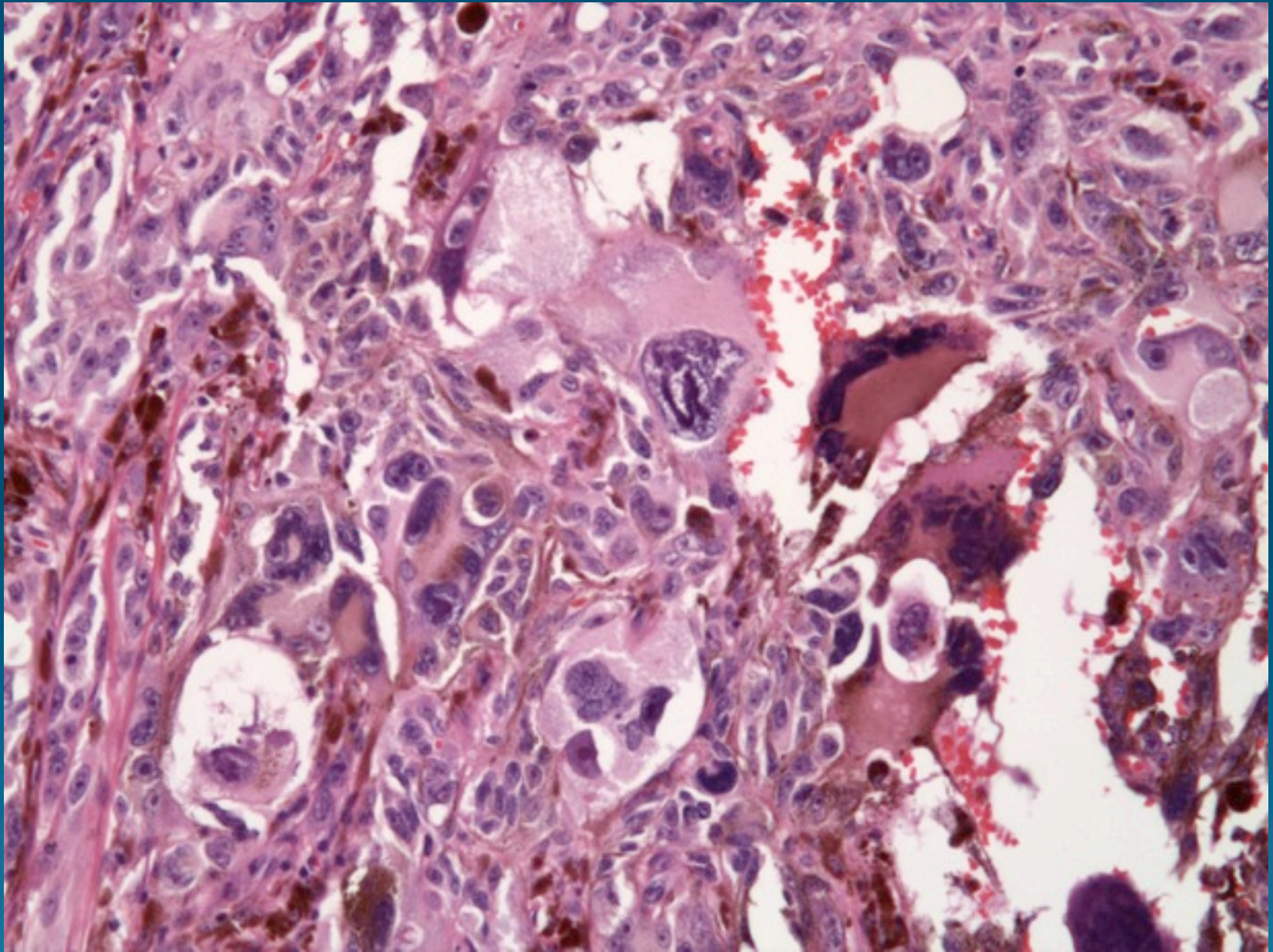


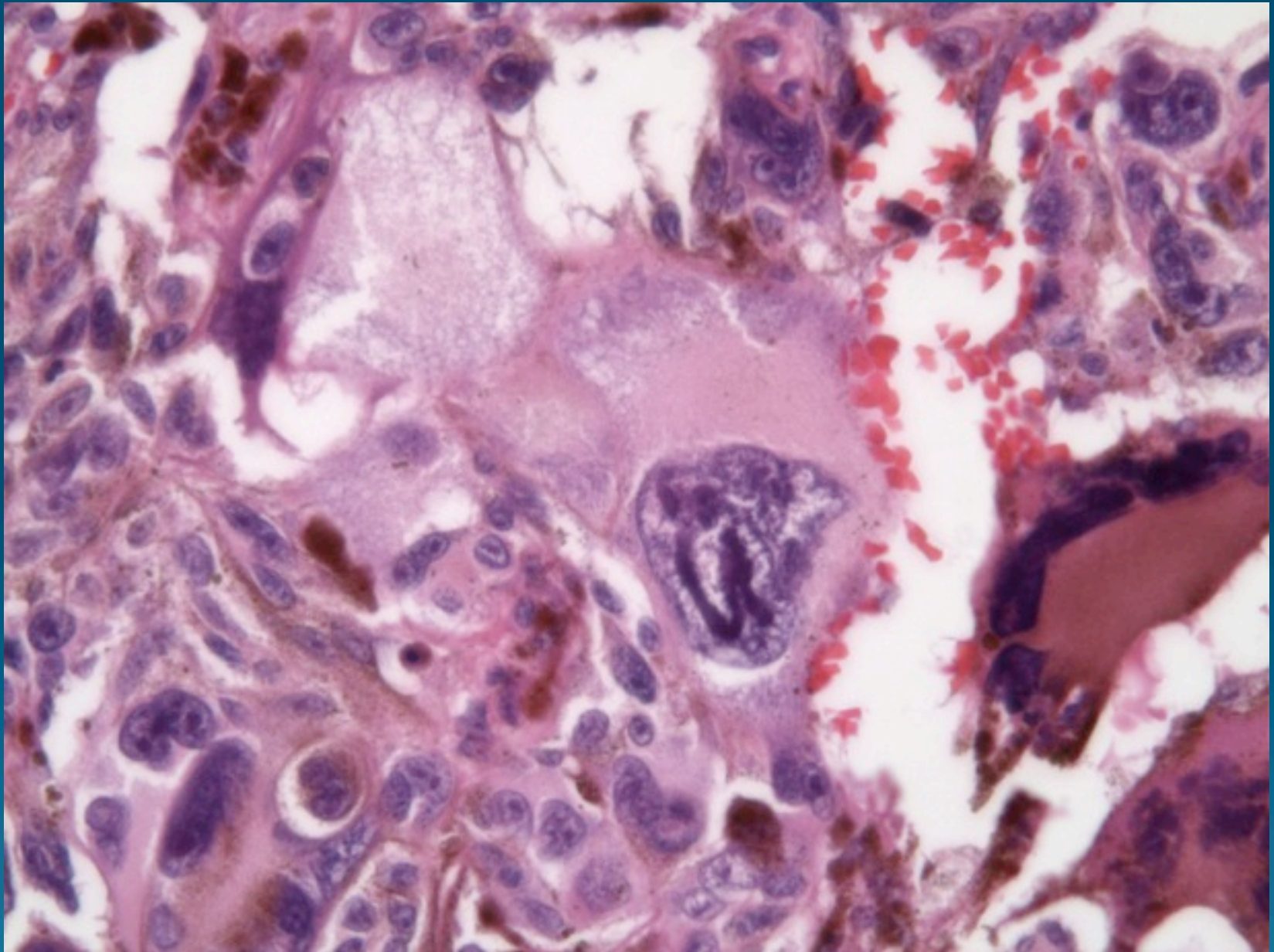




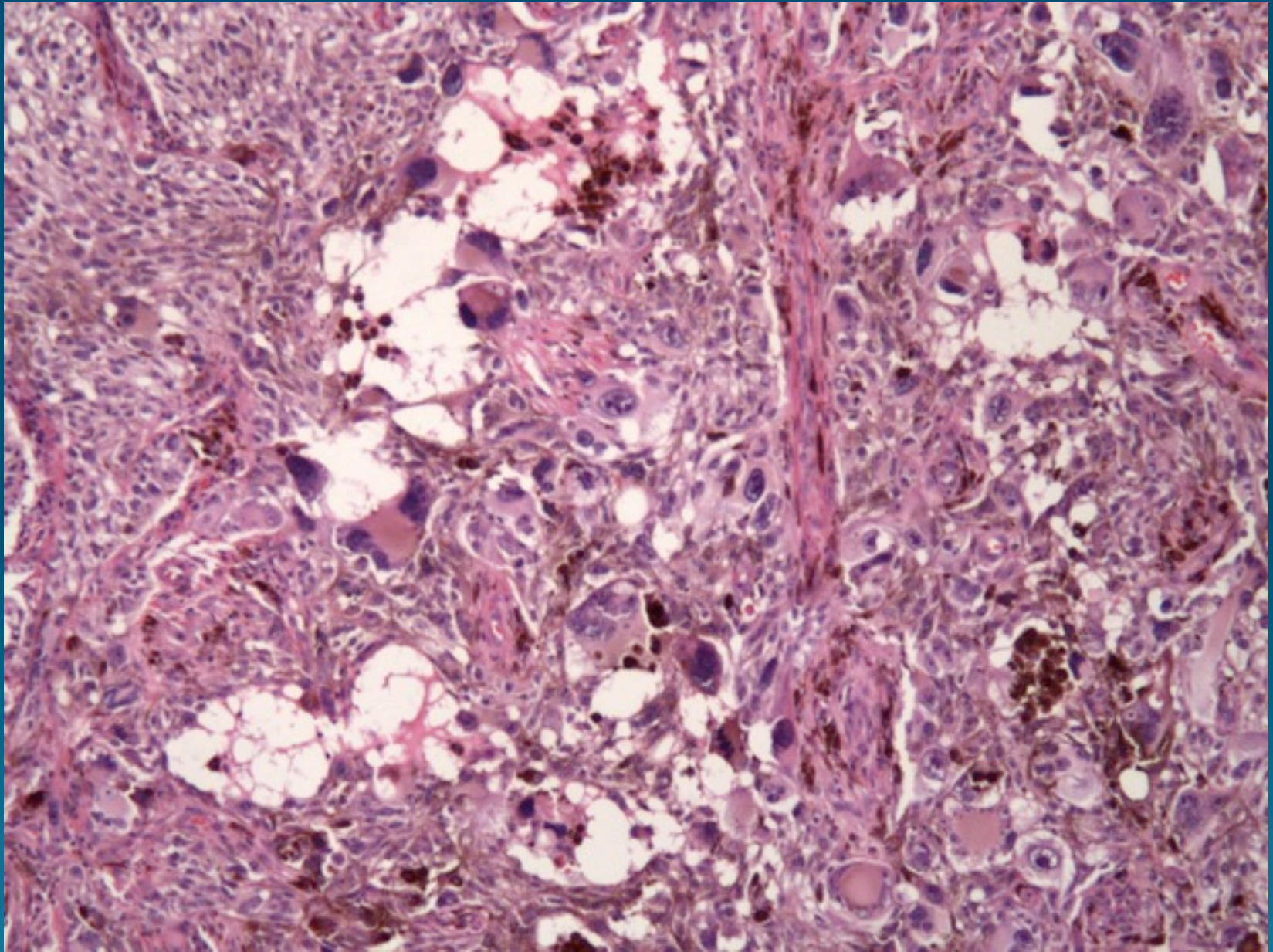


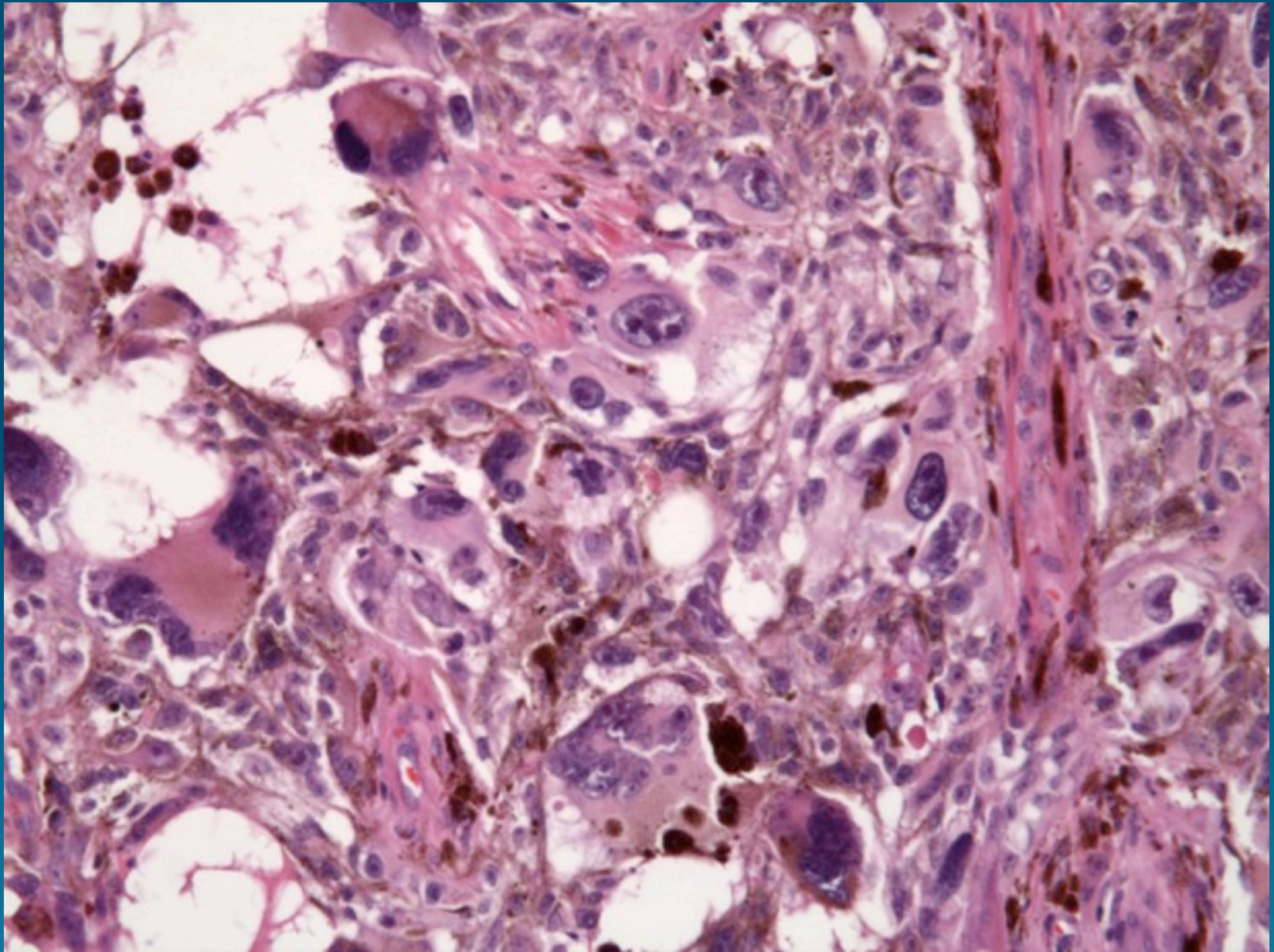


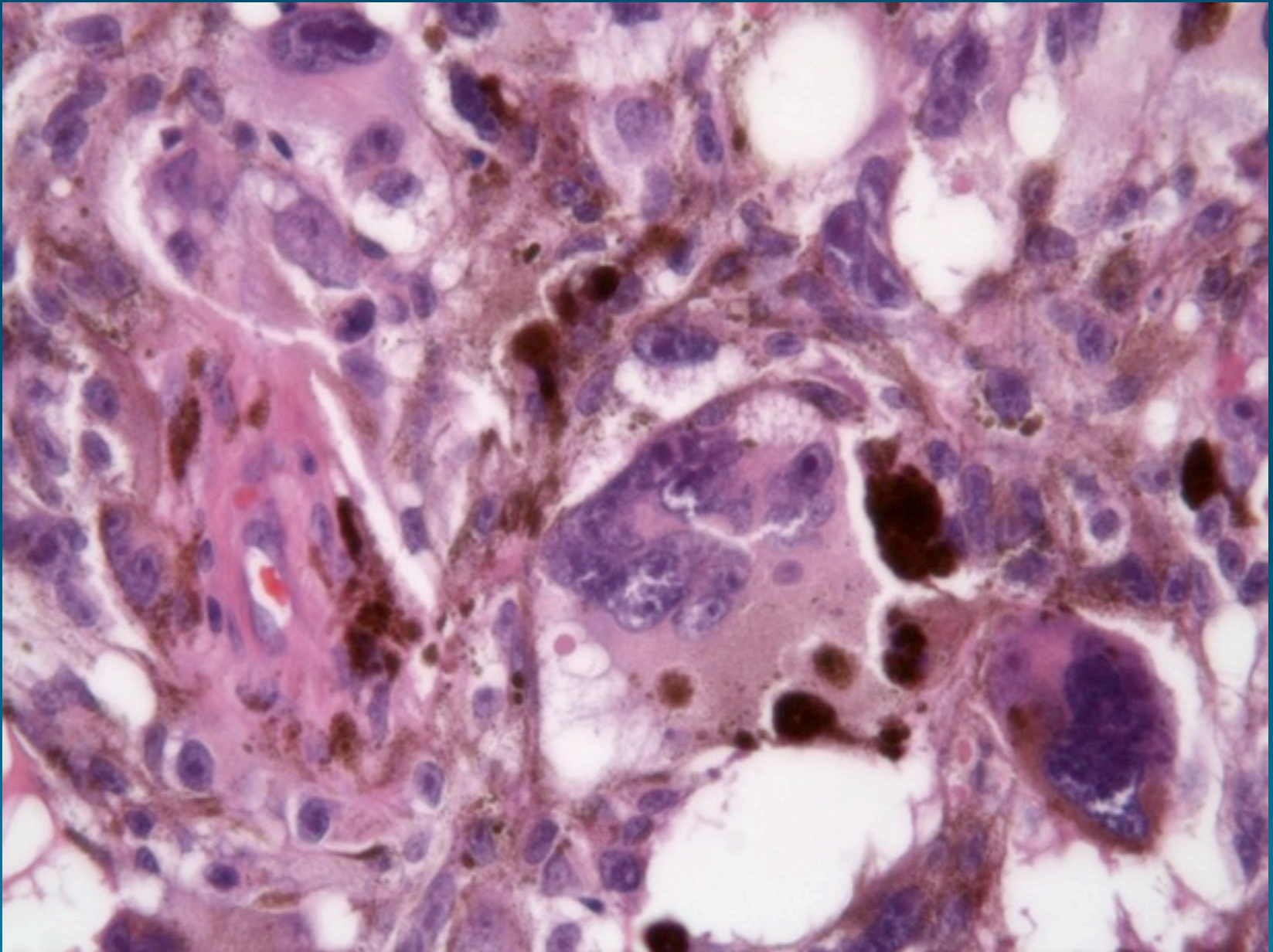






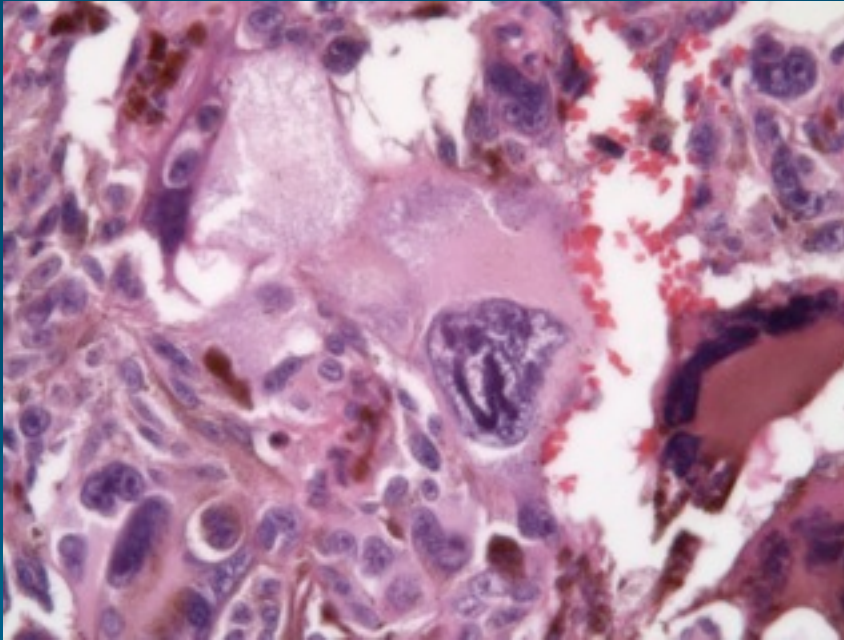






# Melanoma with Monster Cells *aka* Pleomorphic Melanoma

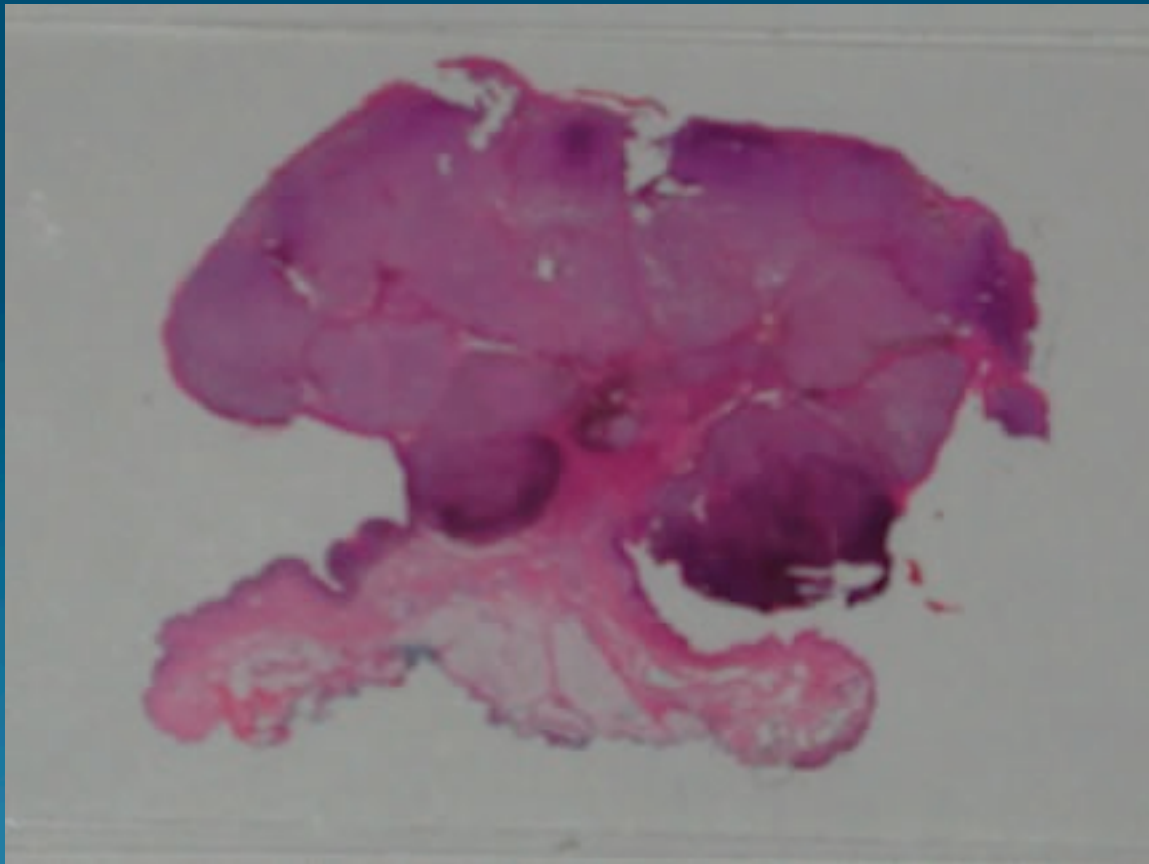
# Histopathology

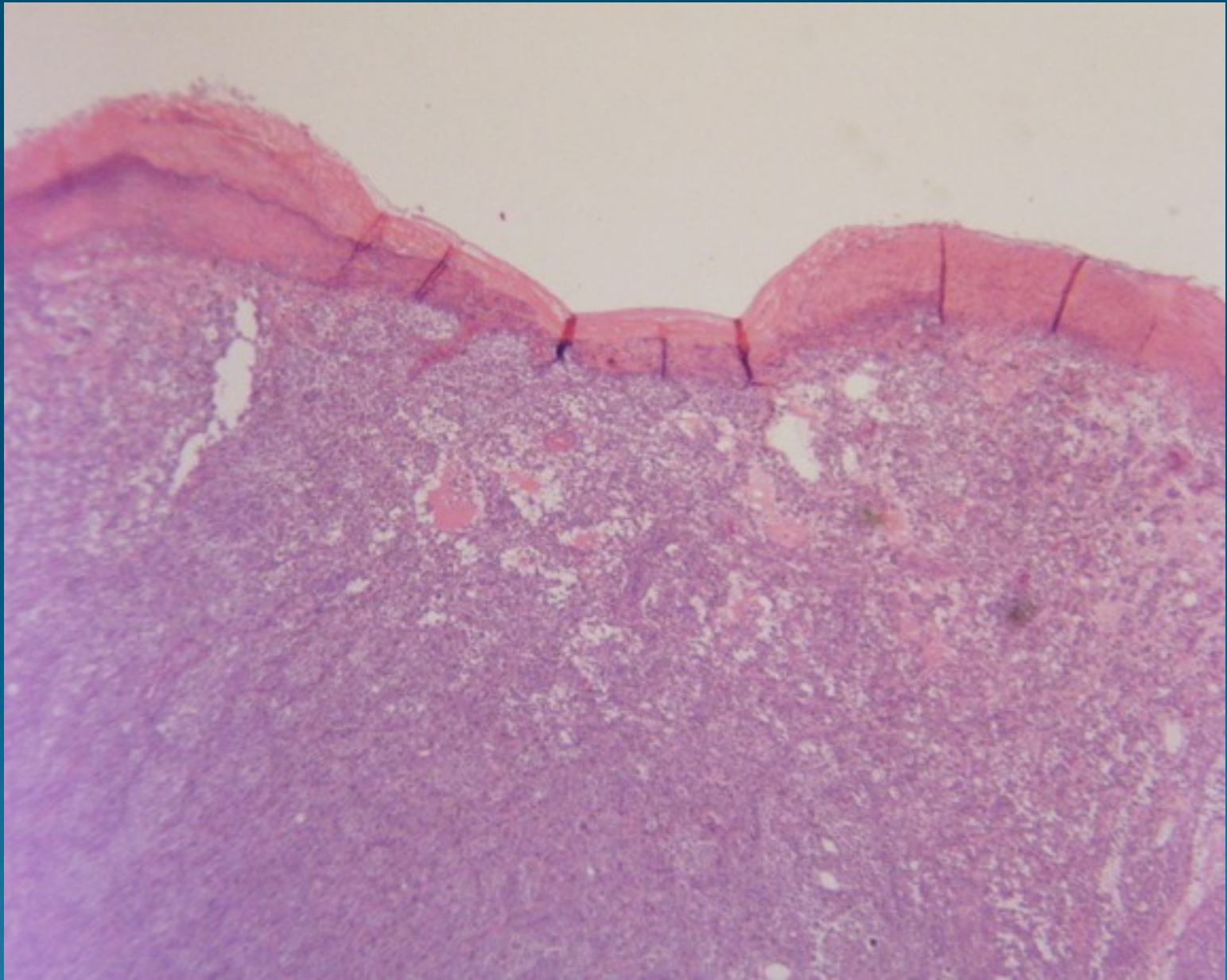


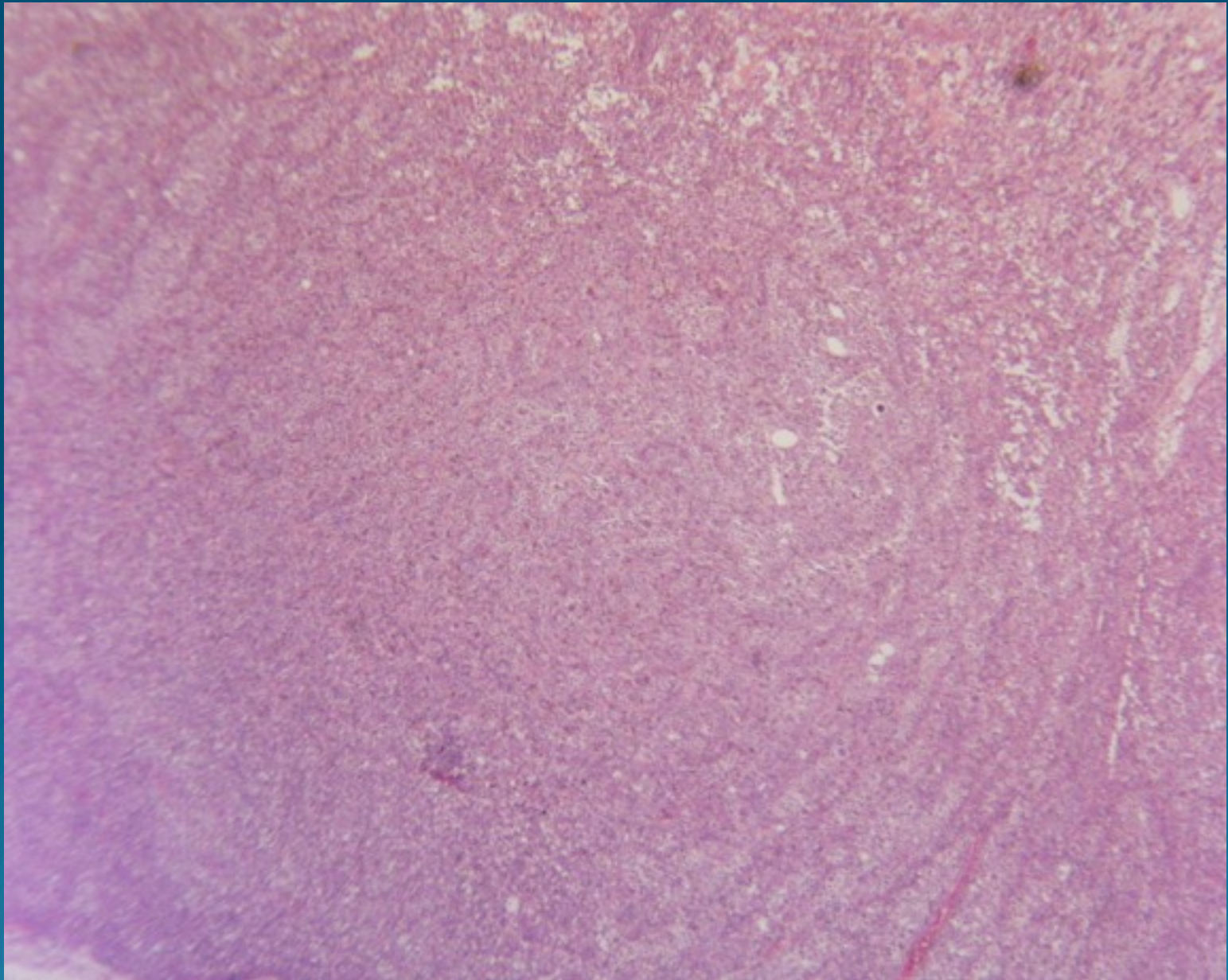
- Analogous to pleomorphic changes in other cutaneous tumors
- 13/99 cases
- Association with nodular melanomas
- DDX: AFX, SCC, BCC

Am J Dermatopathol. 2005 Jun;27(3):208-10. **Monster cells in malignant melanoma.**

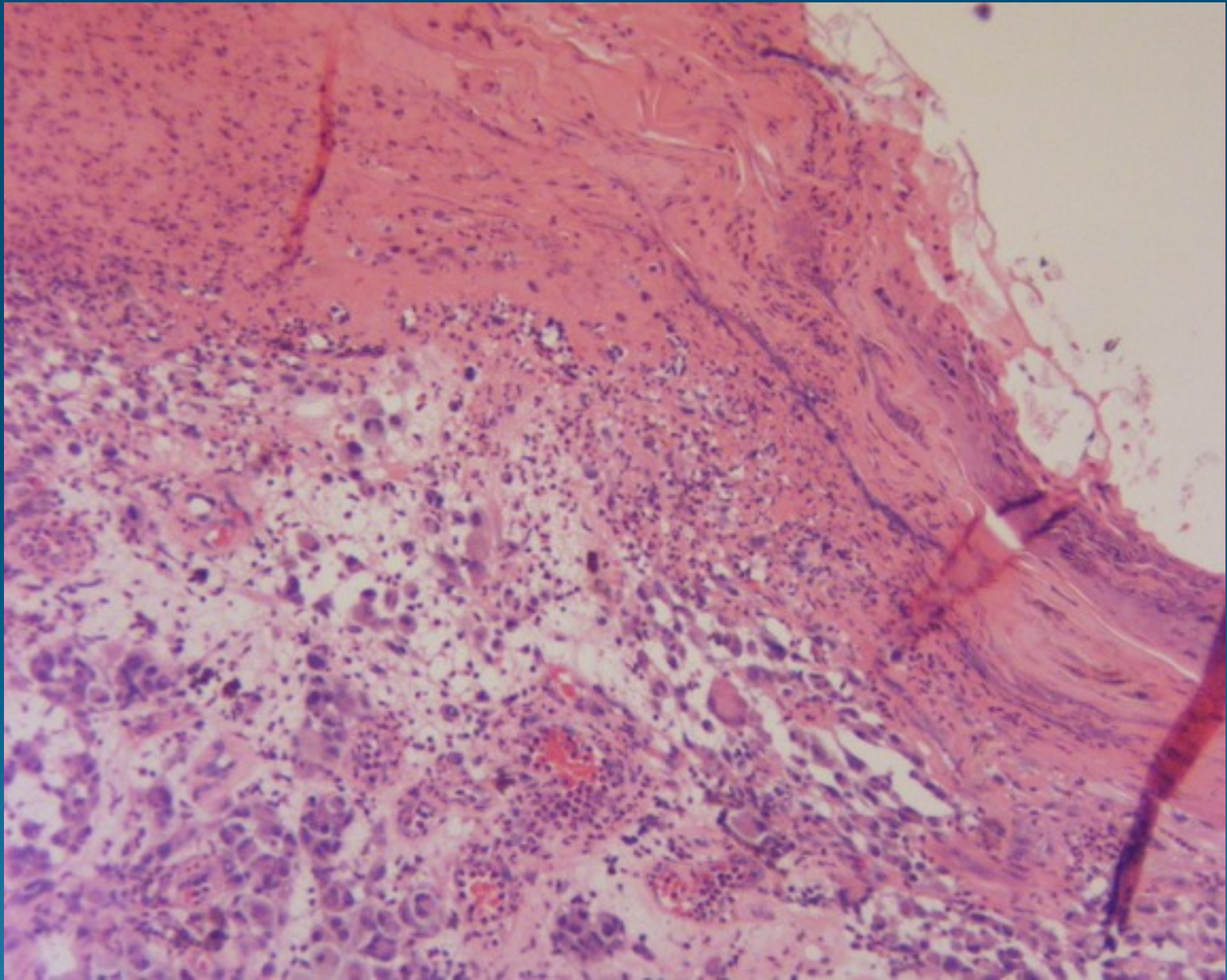
**Boyd AS, Wu H, Shyr Y.** Department of Medicine (Dermatology), Vanderbilt University, Nashville, TN

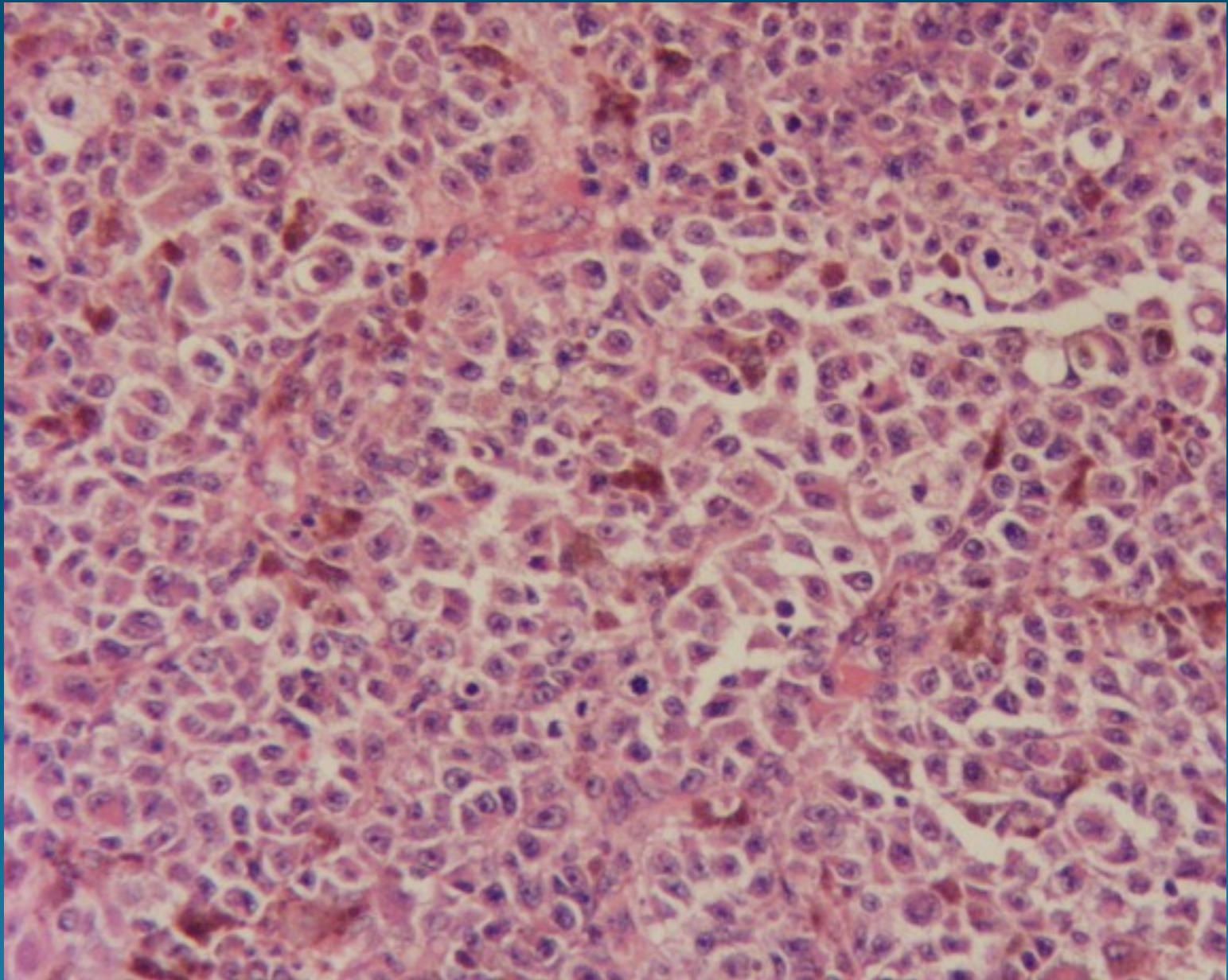


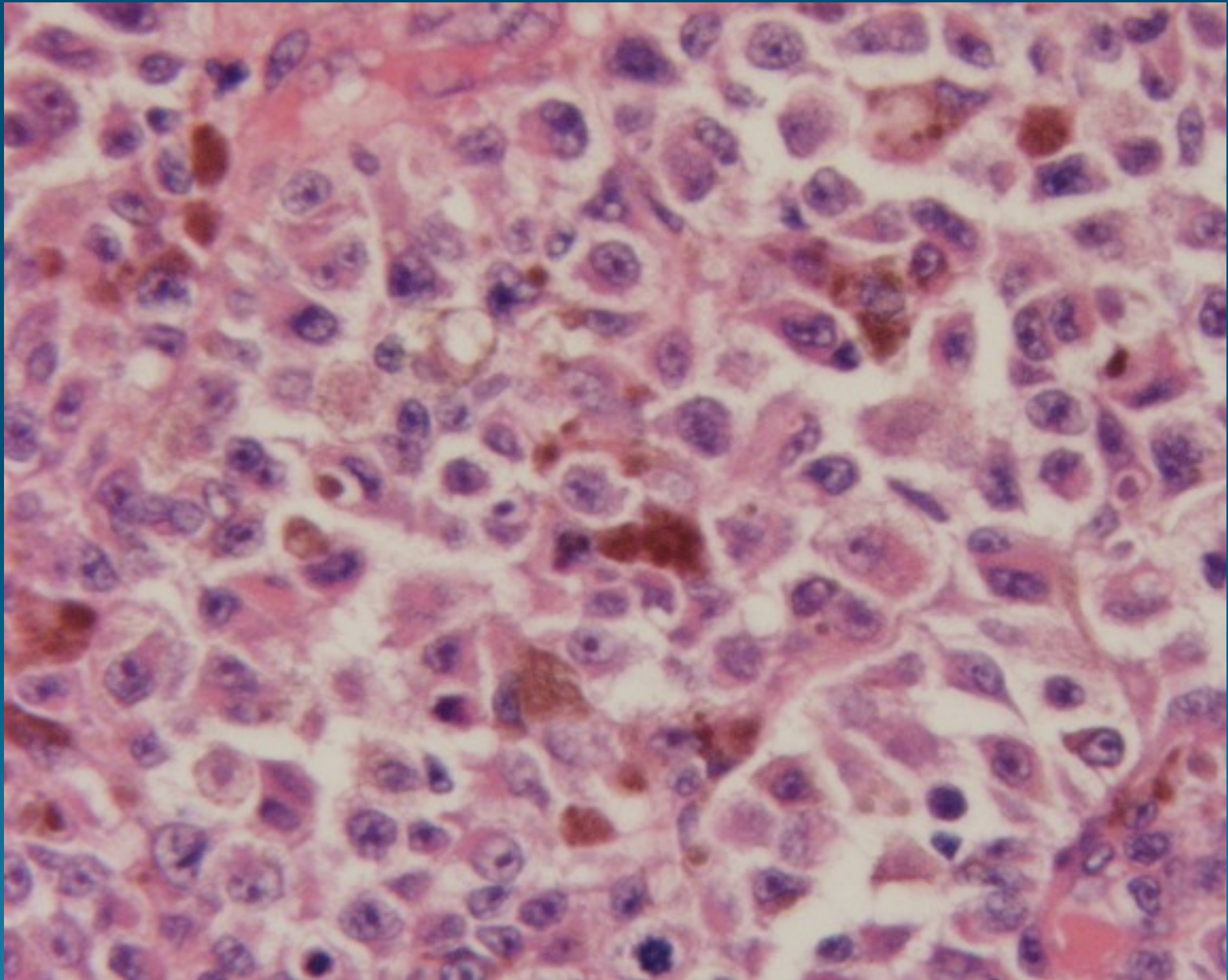






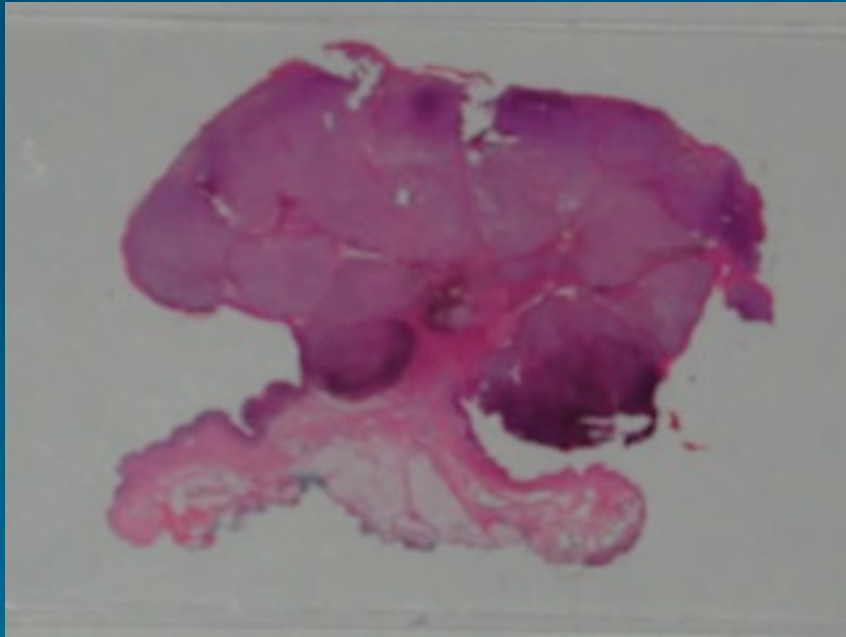




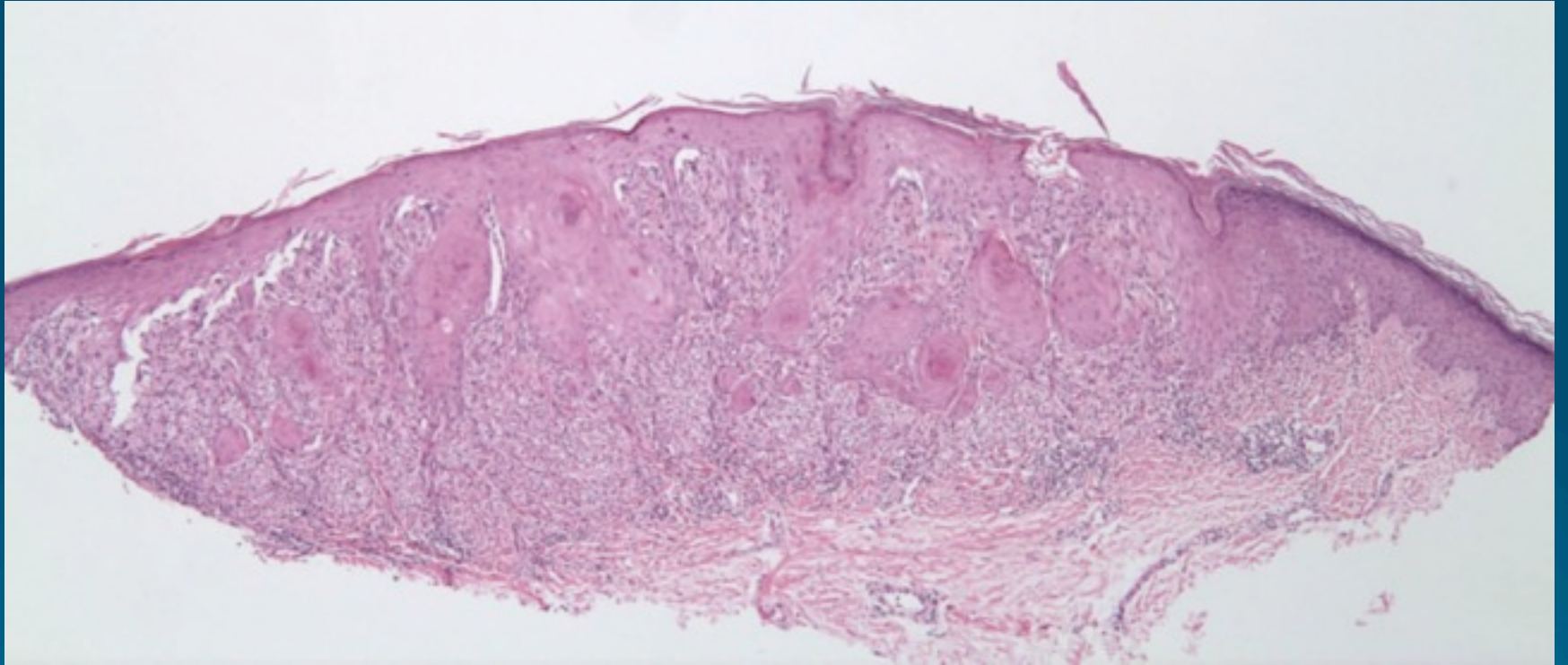


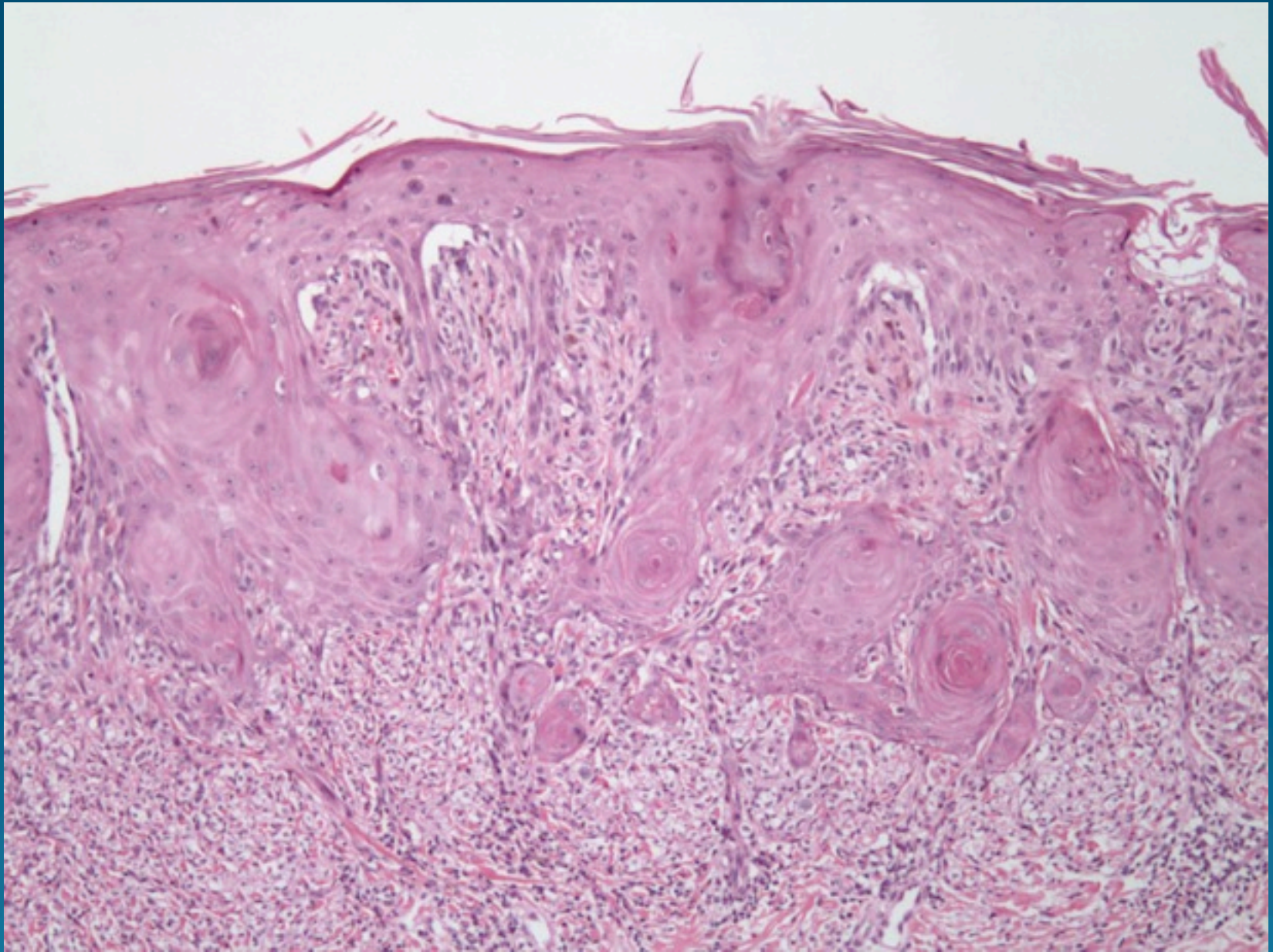
# Polypoid Malignant Melanoma

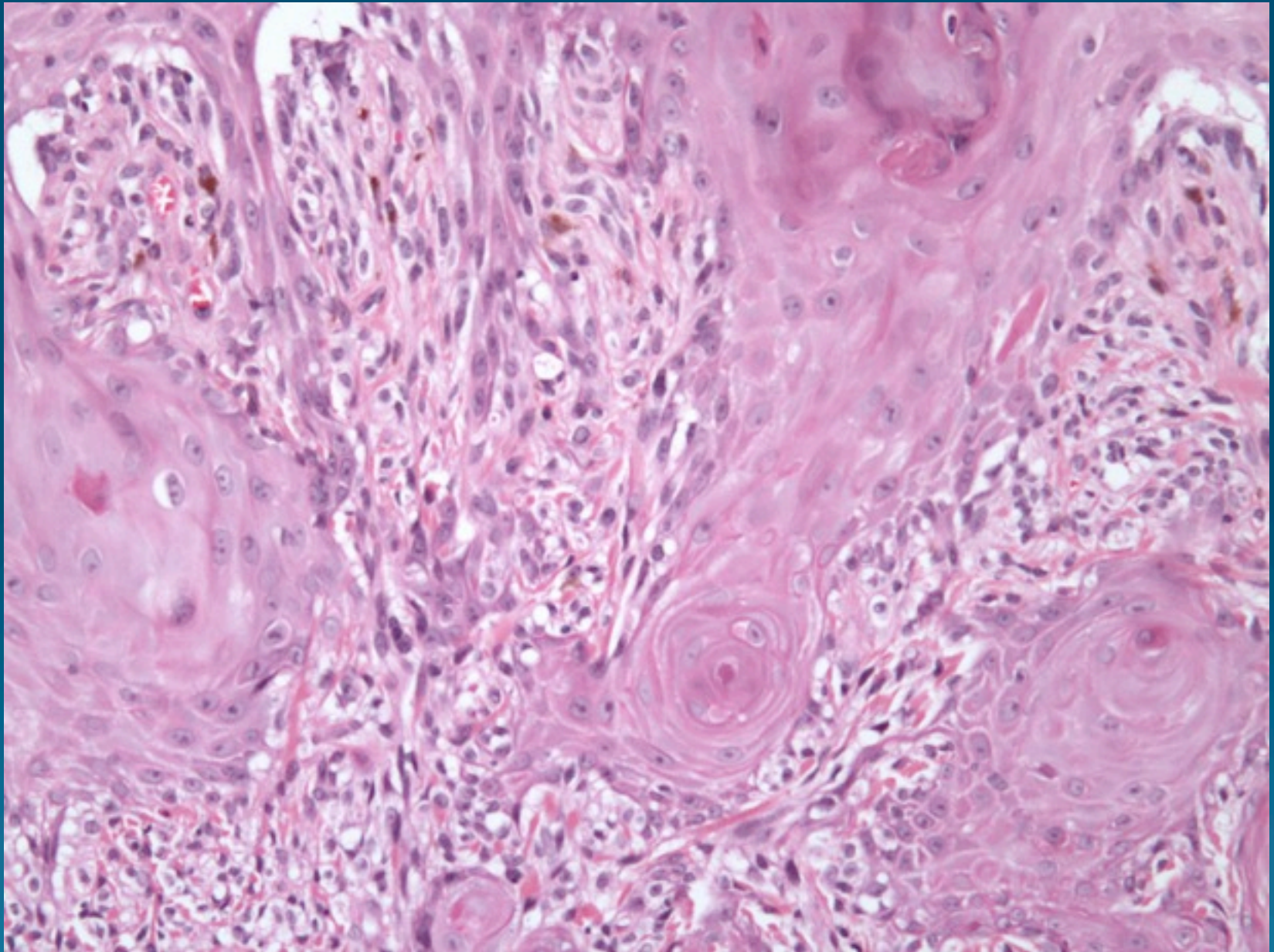
# Histopathology



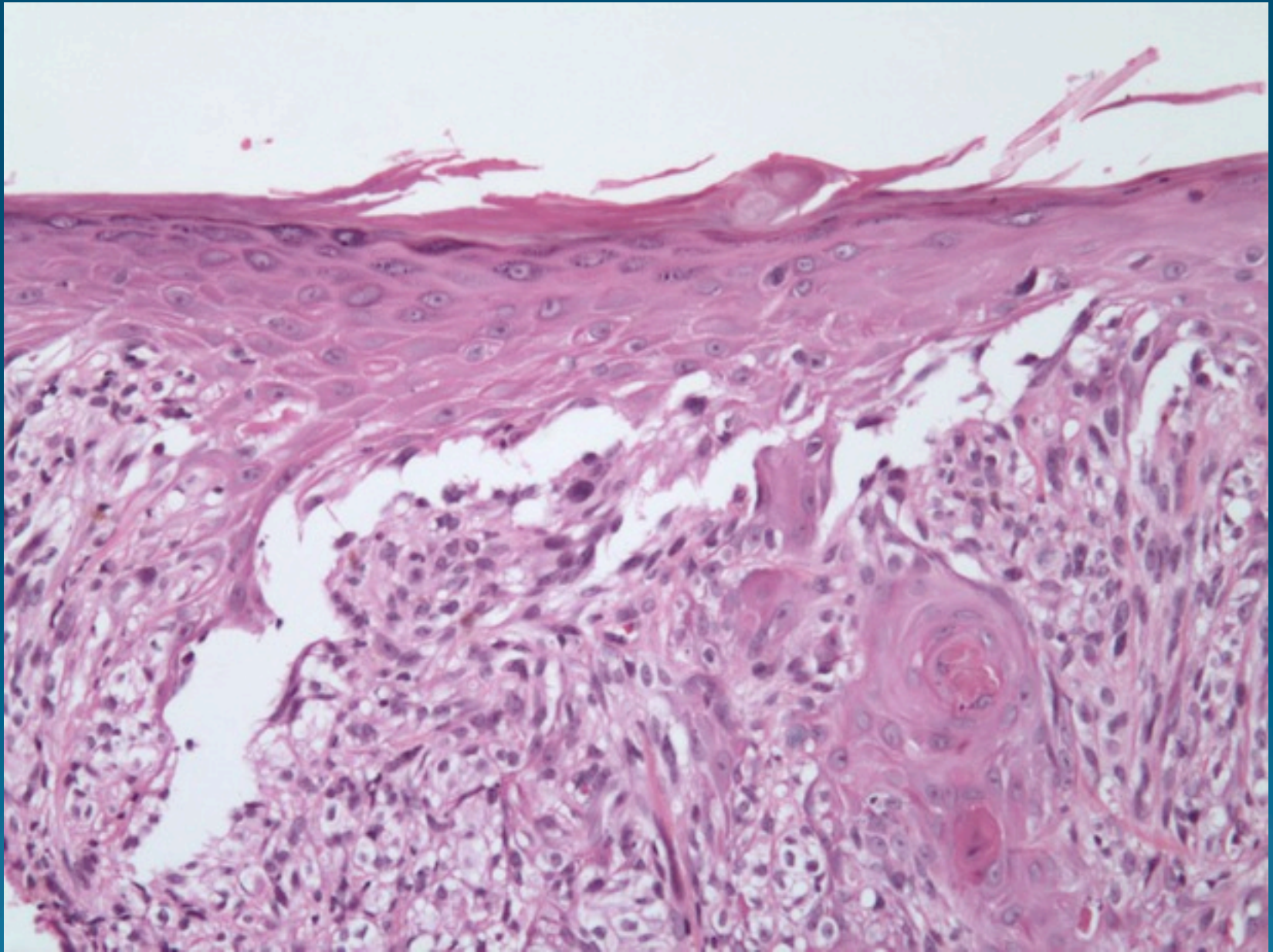
- Polypoid configuration
- Problematic with Clark levels and Breslow thickness
- Multiple measurements

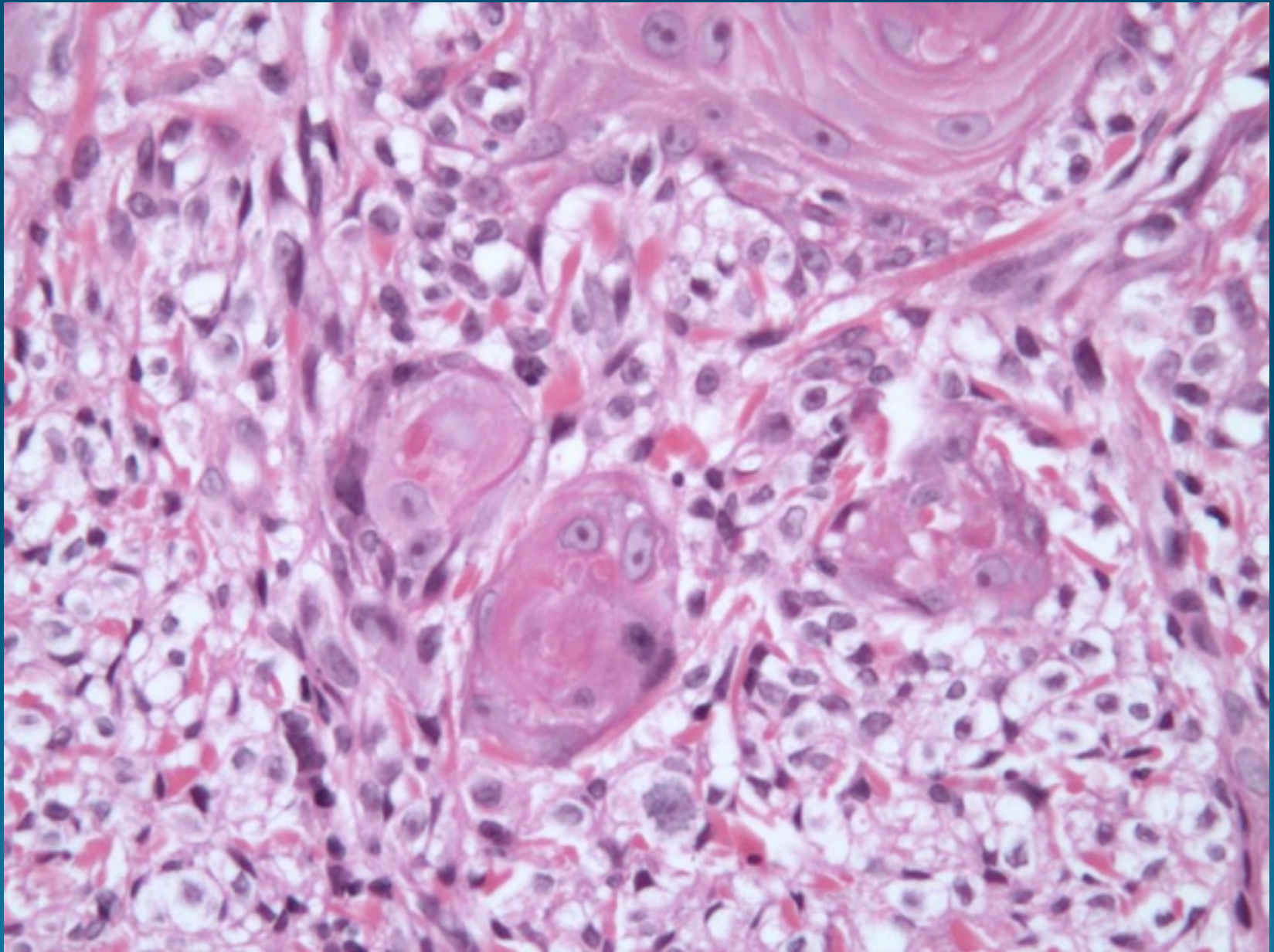


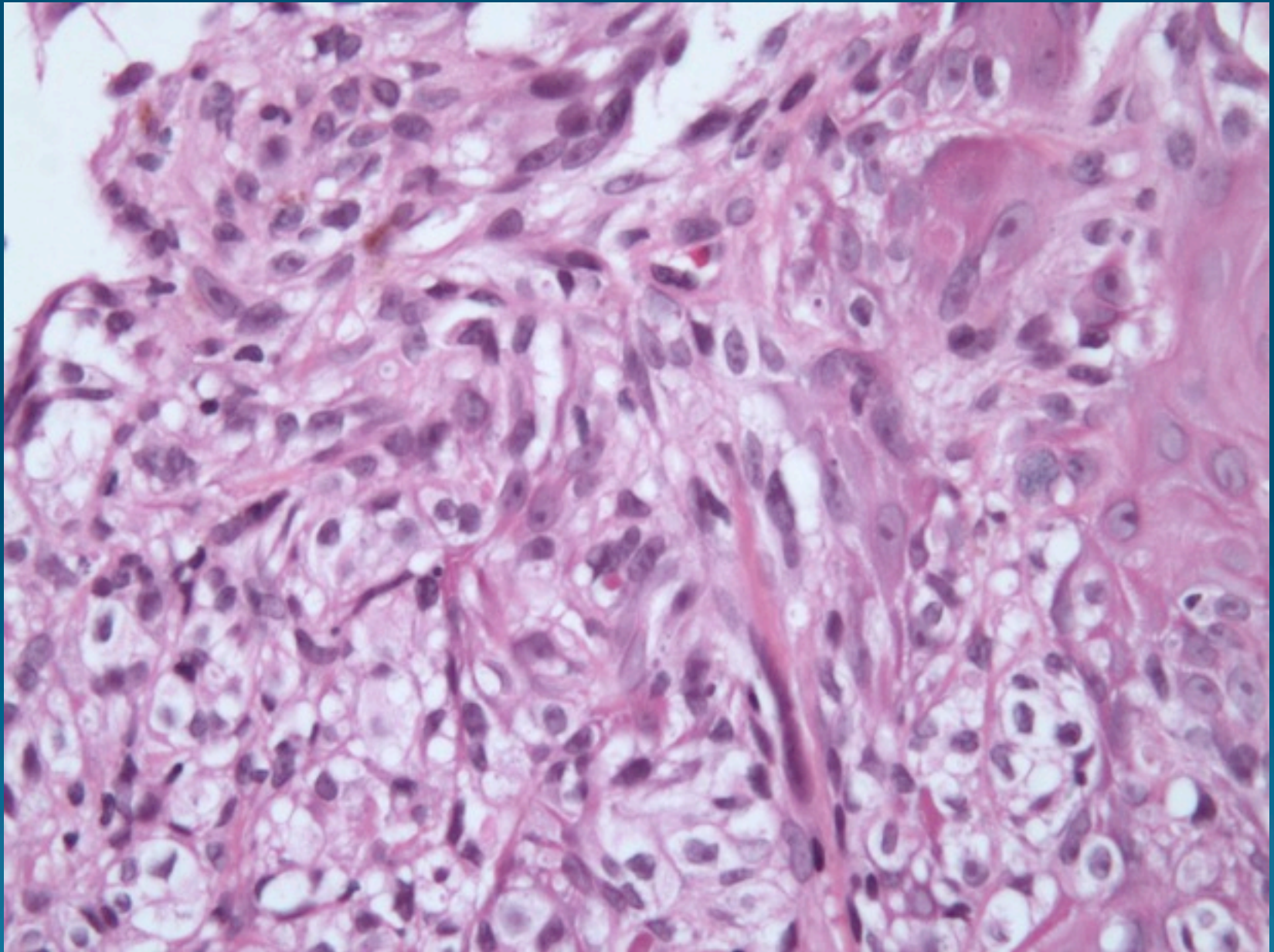


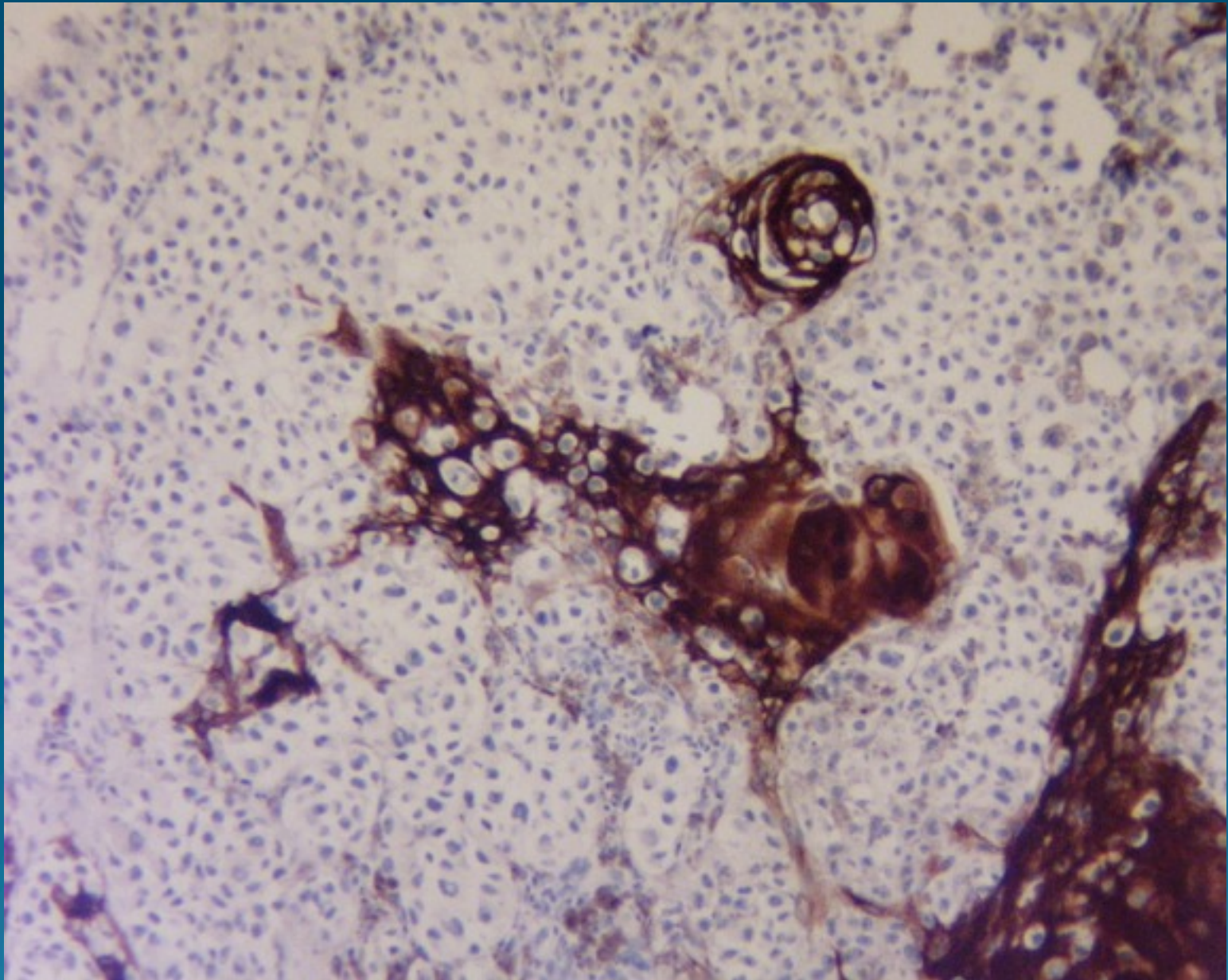


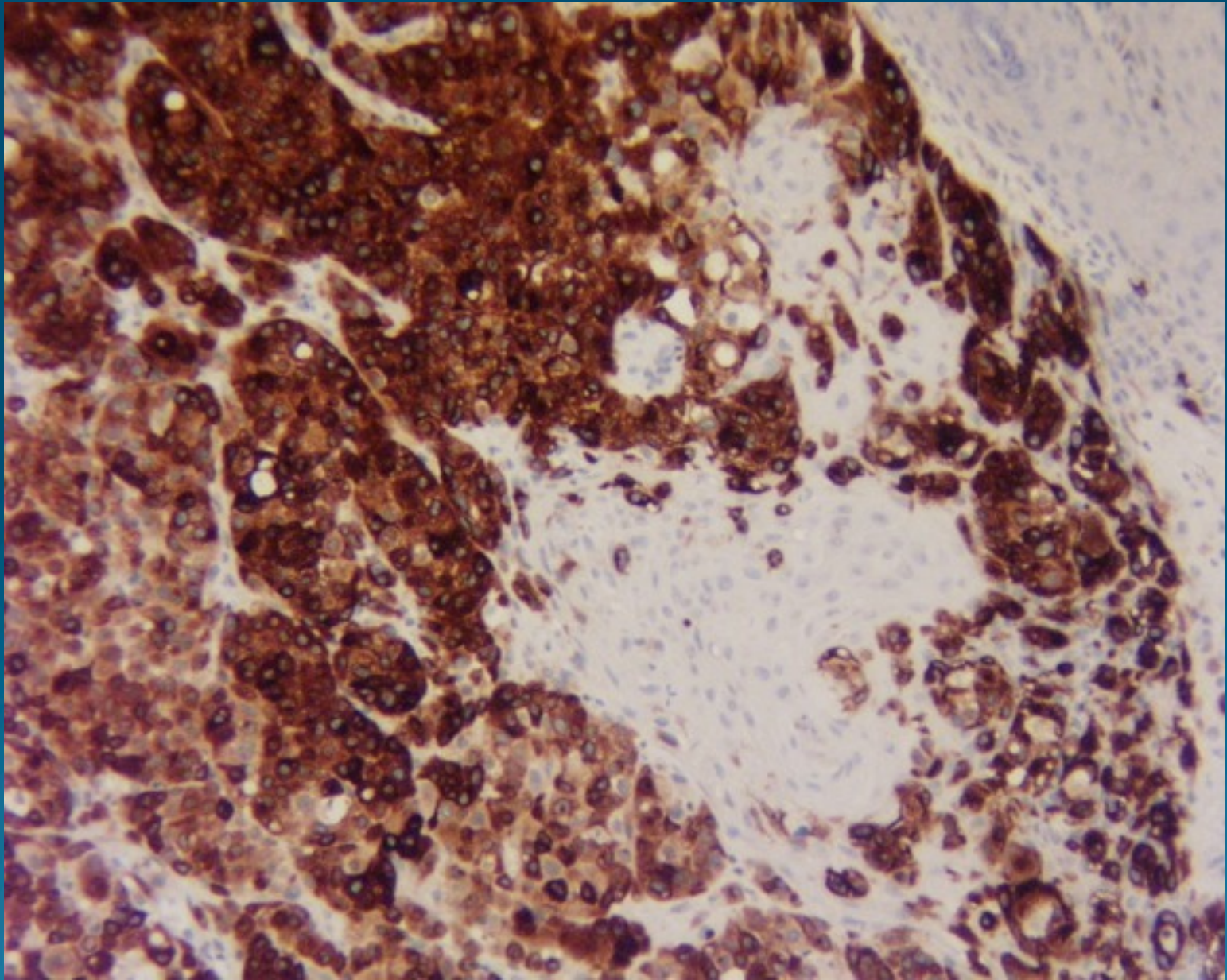






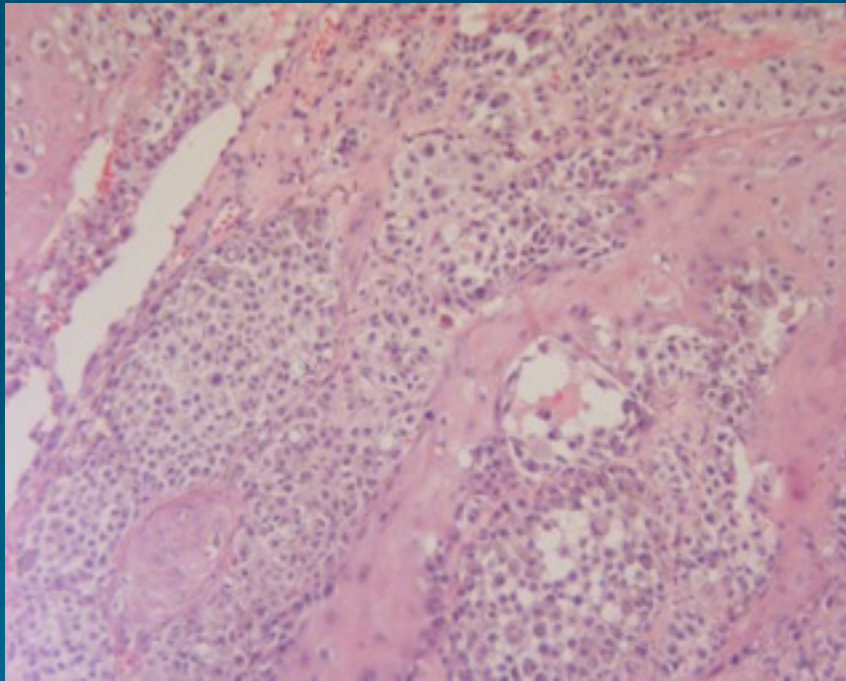






Melanoma  
with  
Pseudoepitheliomatous Hyperplasia

# Histopathology

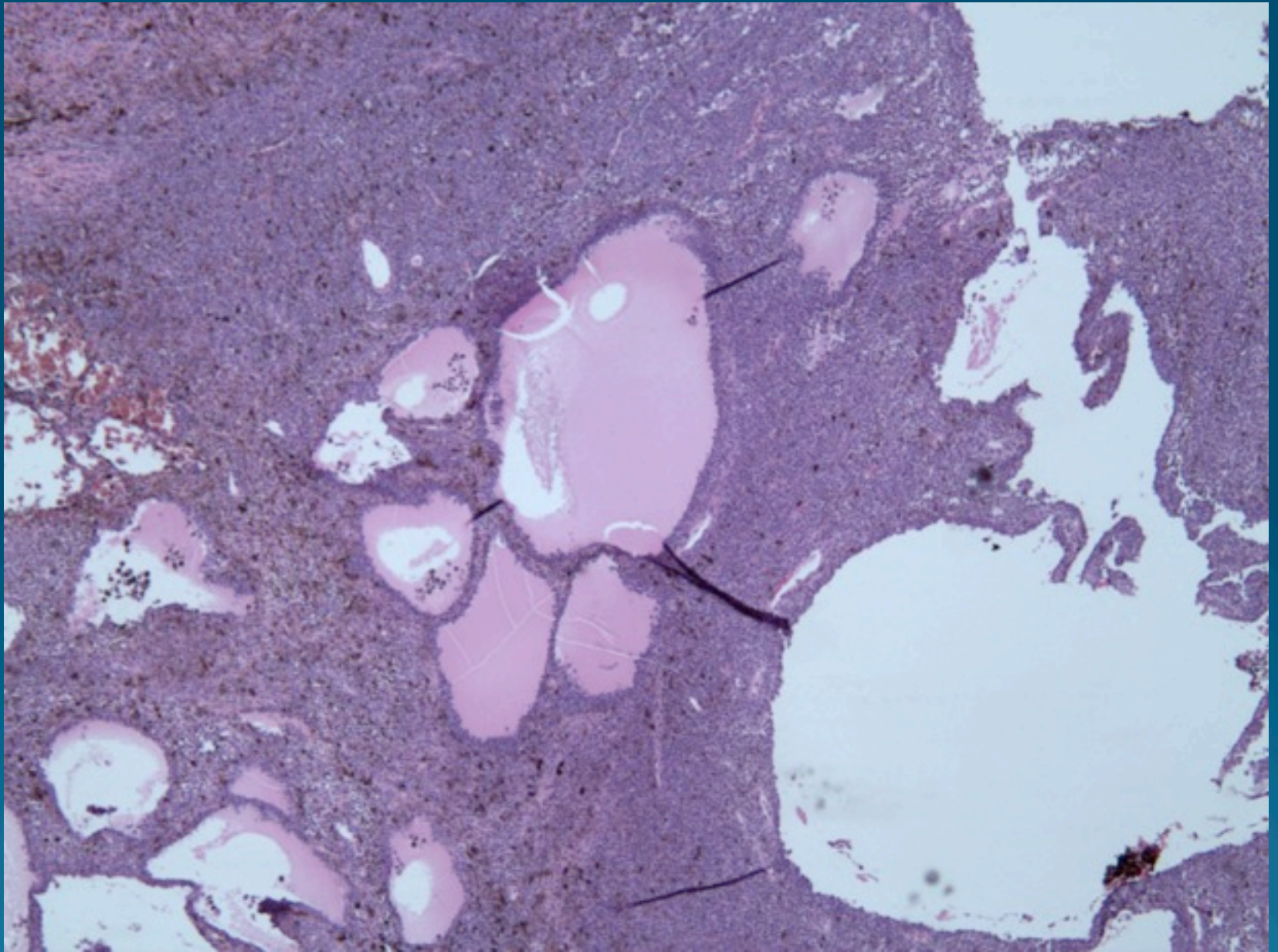


- Not uncommon
- May be difficult to separate epithelial from melanocytic
- Rule out collision tumor
- May need IPOX
- DDX: SCC, BCC, Adnexal CA

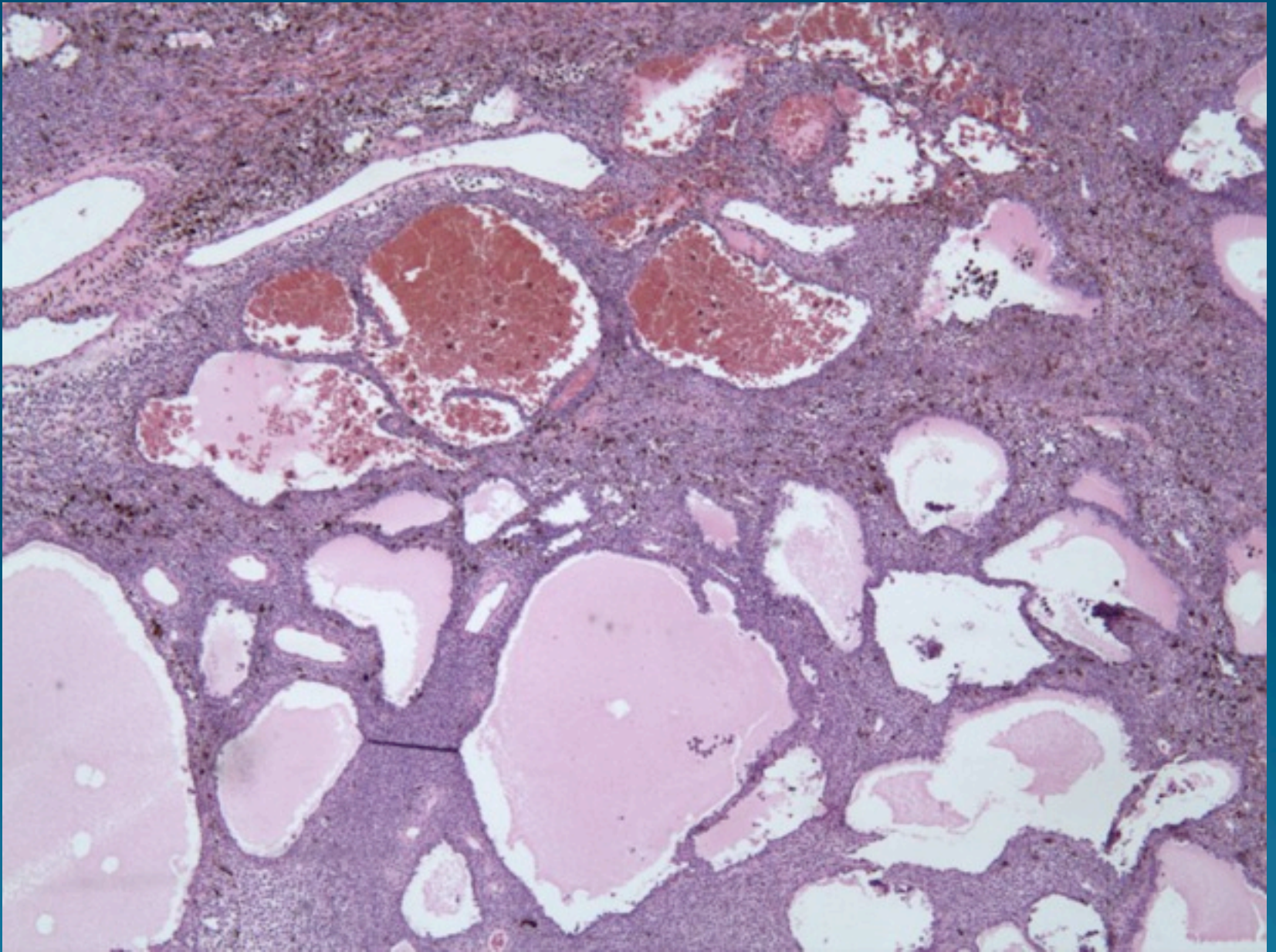
J Cutan Pathol. 2000 Mar;27(3):153-6.

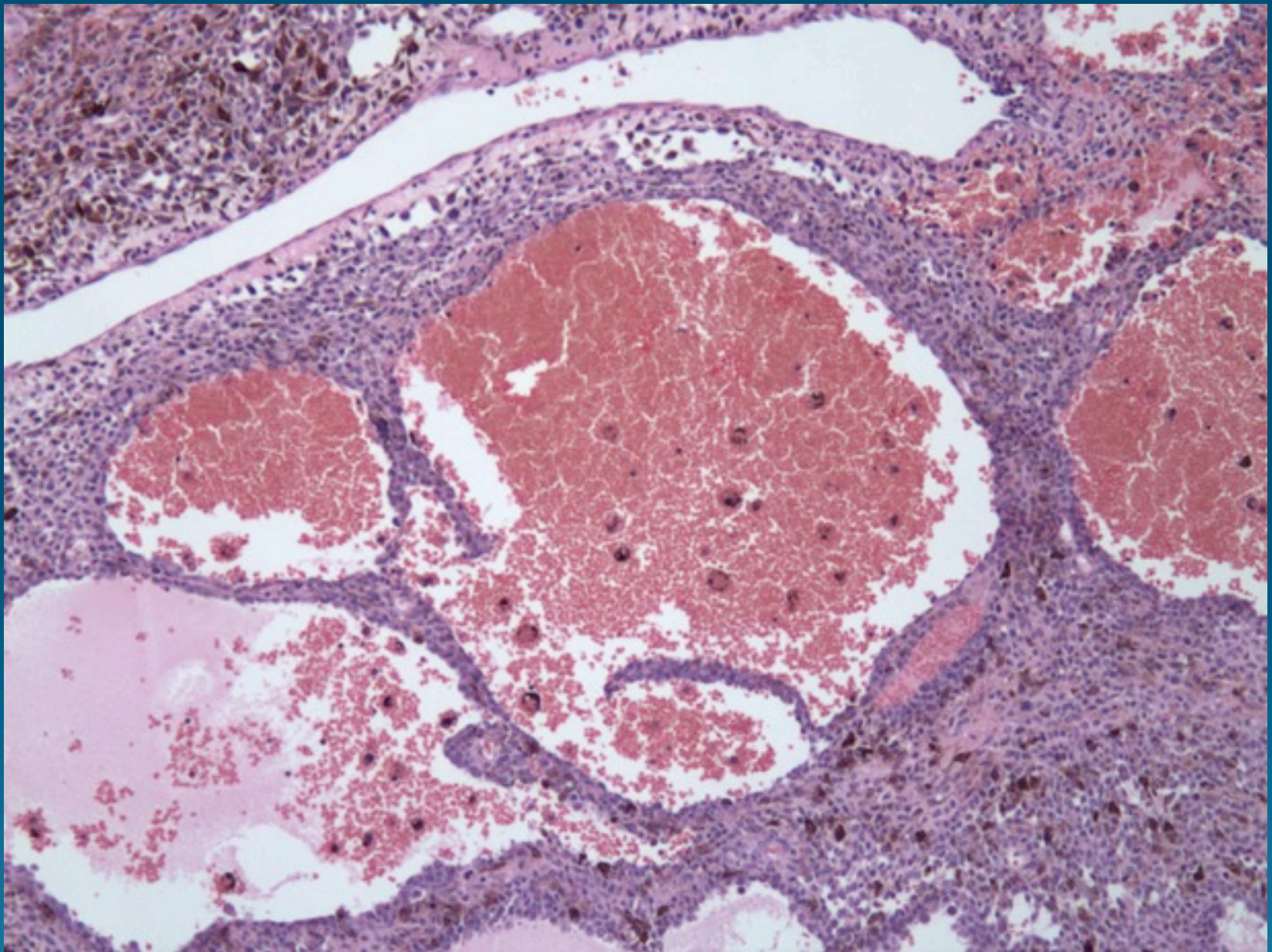
**Cutaneous malignant melanoma associated with extensive pseudoepitheliomatous hyperplasia. Report of a case and discussion of the origin of pseudoepitheliomatous hyperplasia.**

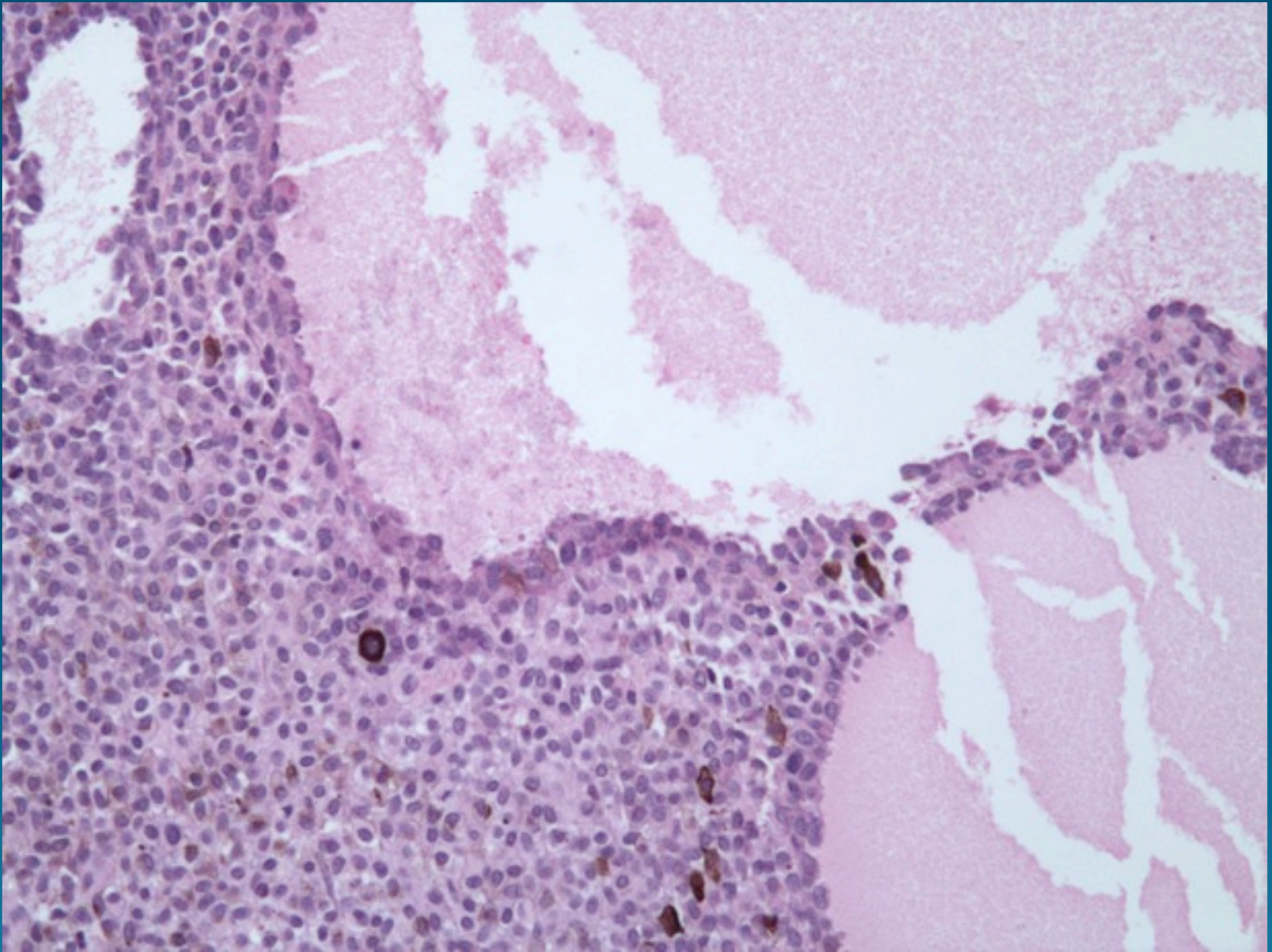
Hanly AJ, Jorda M, Elgart GW Department of Pathology, Jackson Memorial Hospital, Miami, Florida

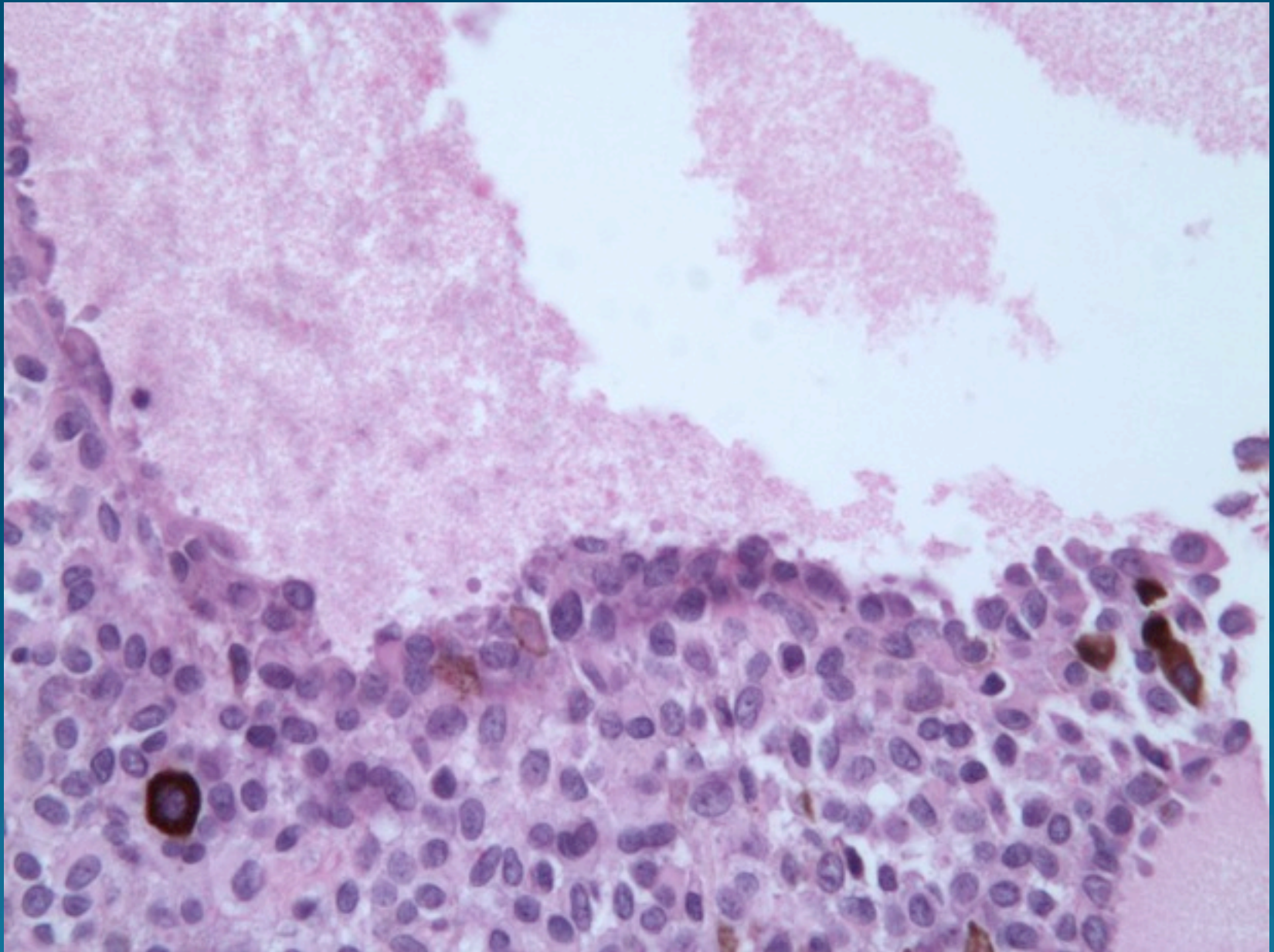


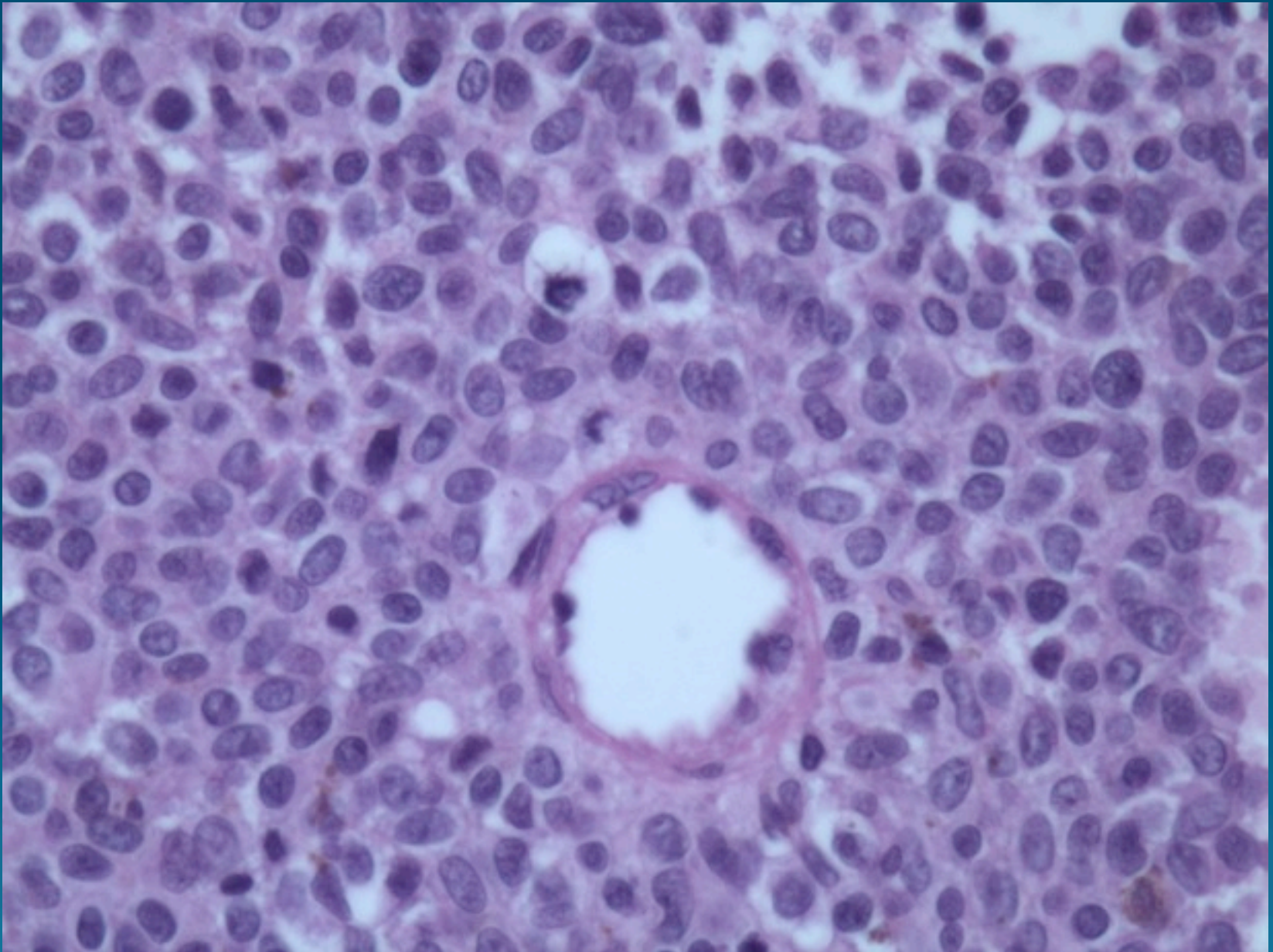






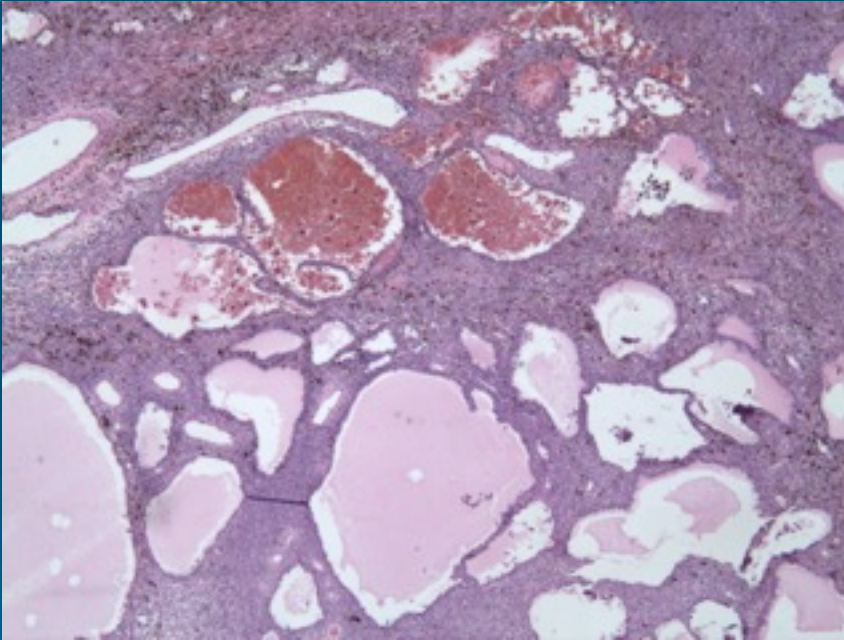




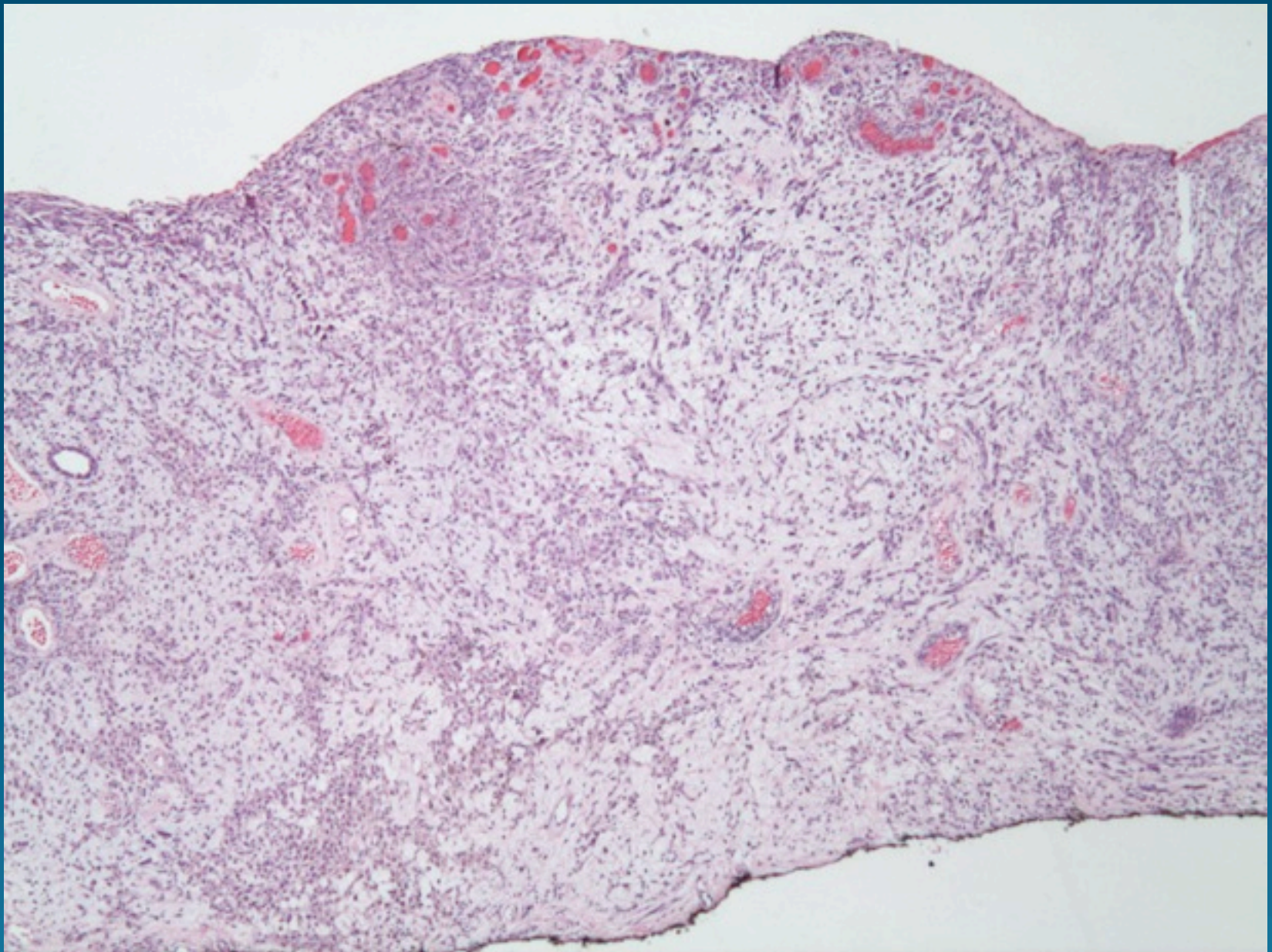


# Pseudovascular Malignant Melanoma

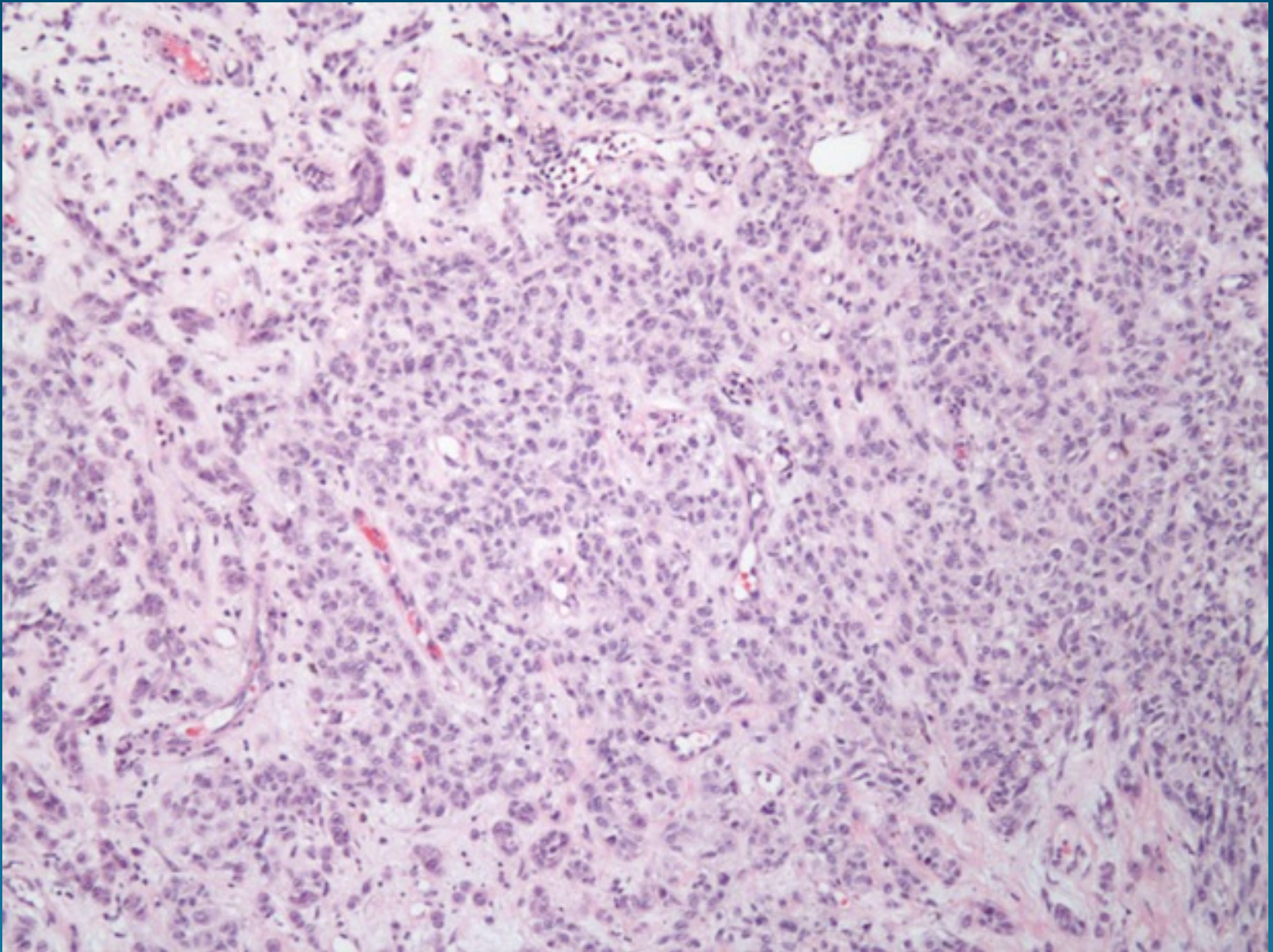
# Histopathology

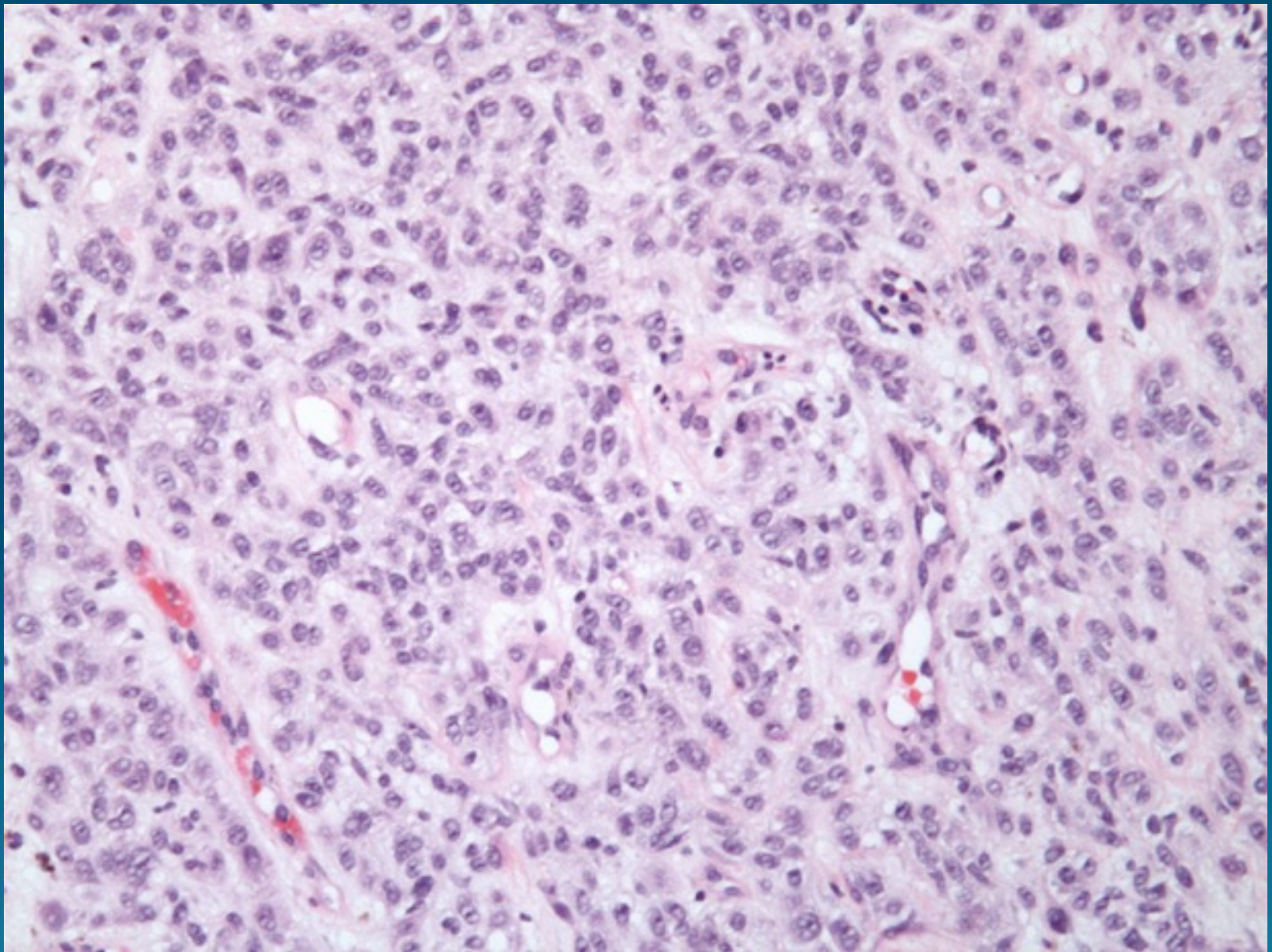


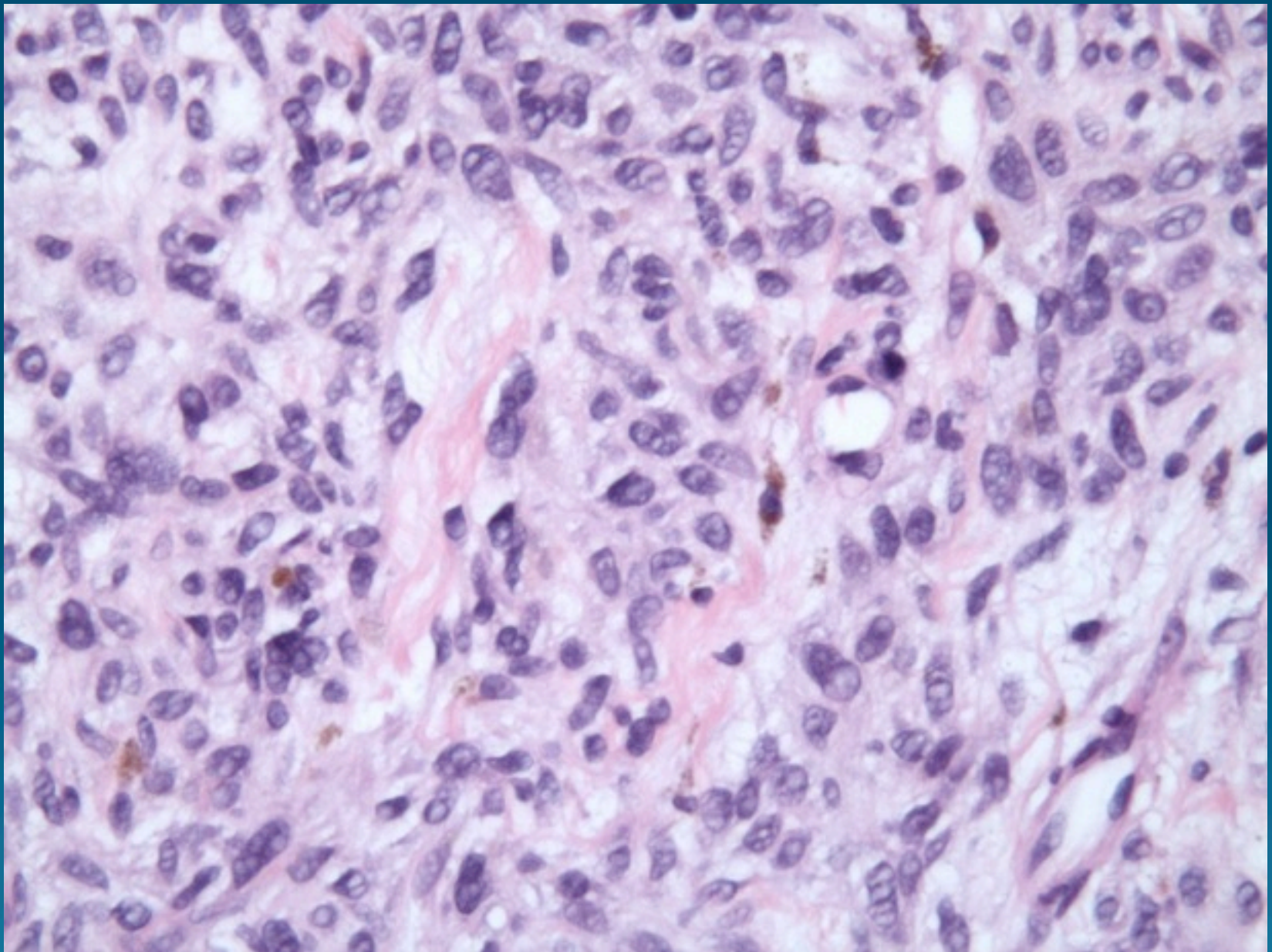
- Pseudovascular spaces
- Separate hemosiderin from melanin
- Probably degenerative
- DDX: Hemangioma, Angiosarcoma, Eccrine tumor

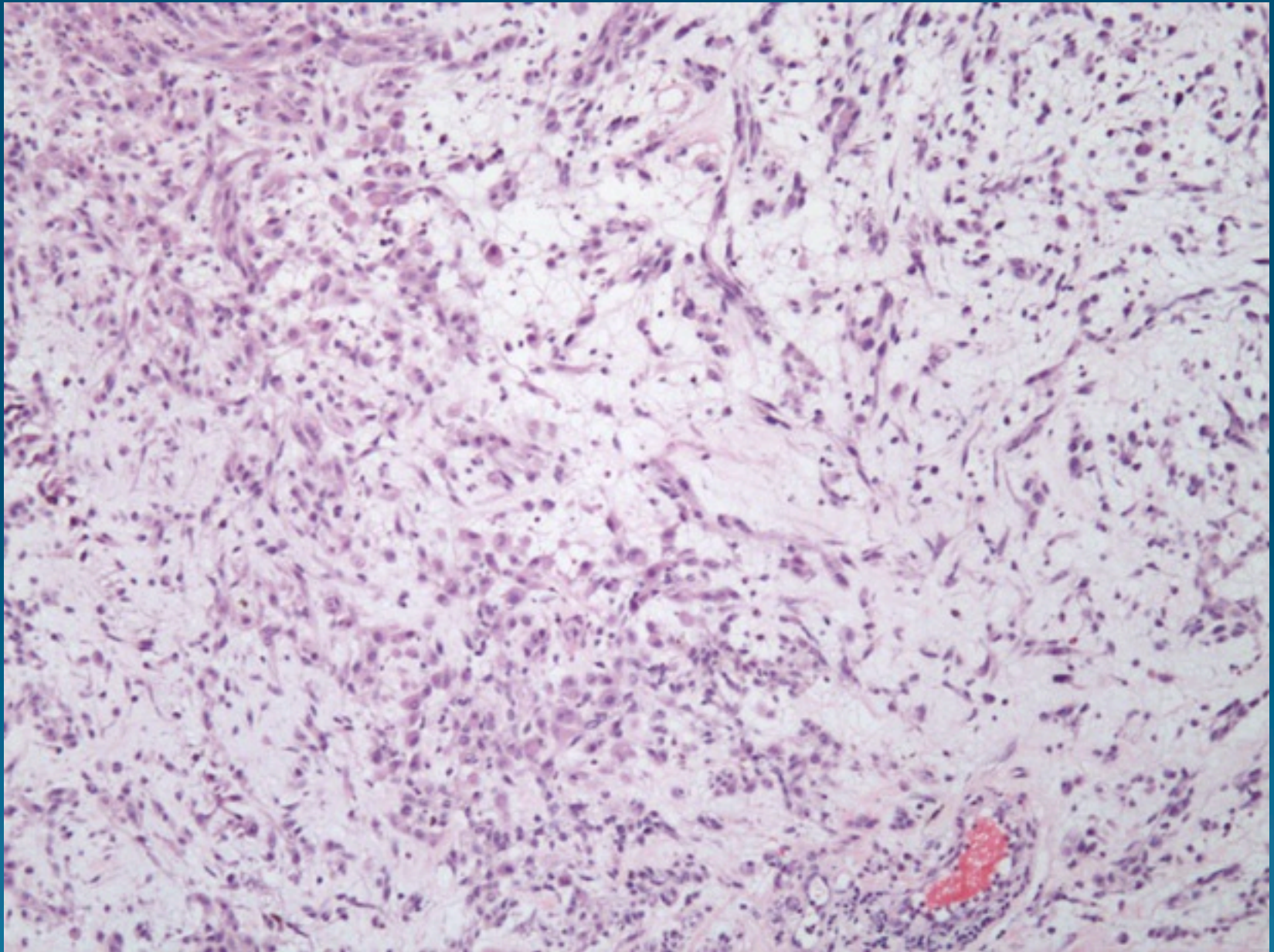


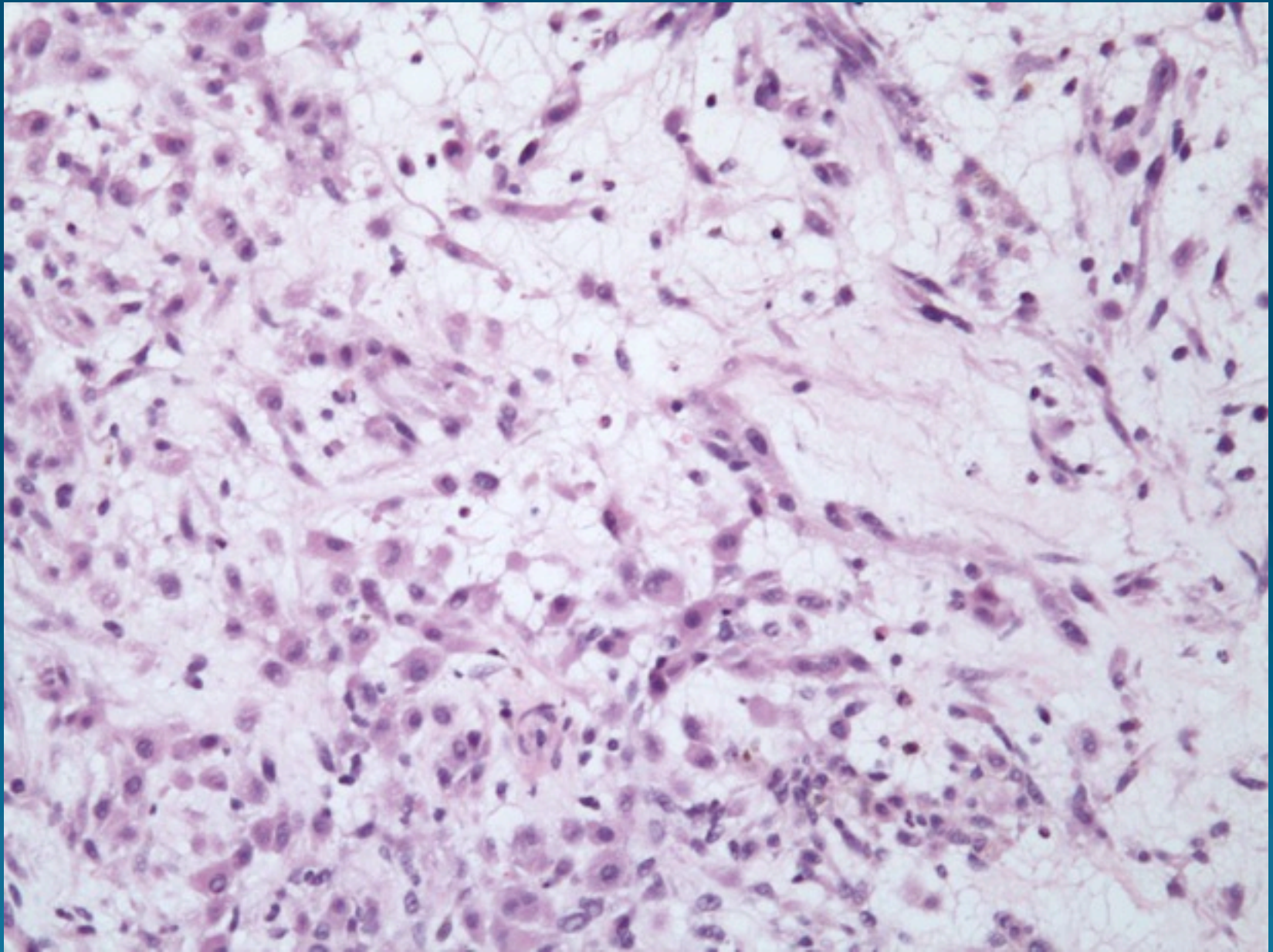


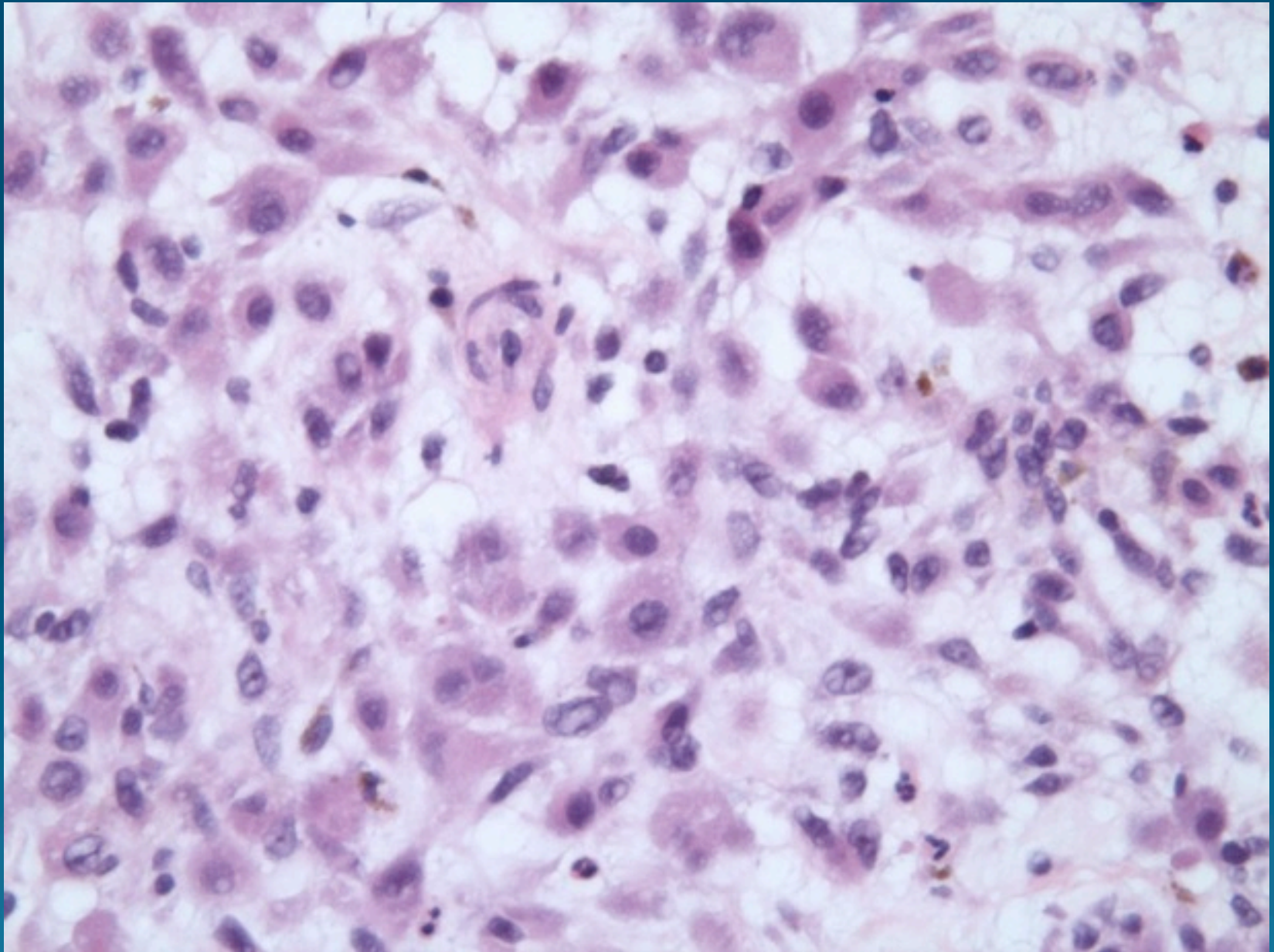






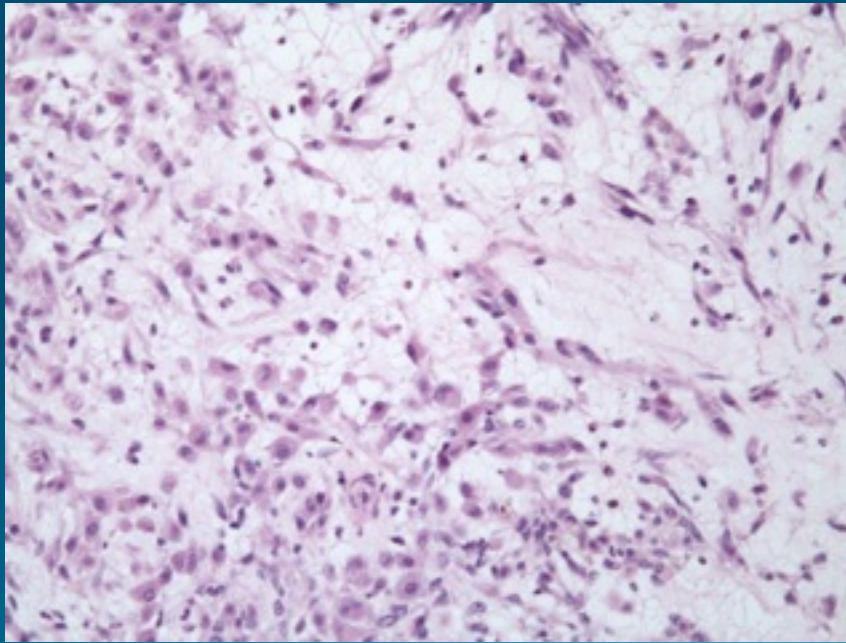






# Myxomucinous Melanoma

# Histopathology



- Myxoid background
- Variable 15-80%
- Alcian Blue+  
Hyaluronidase sensitive
- No clear difference in biology
- Problematic for metastatic lesions
- DDX: Myxoid sarcomas, mucinous CA

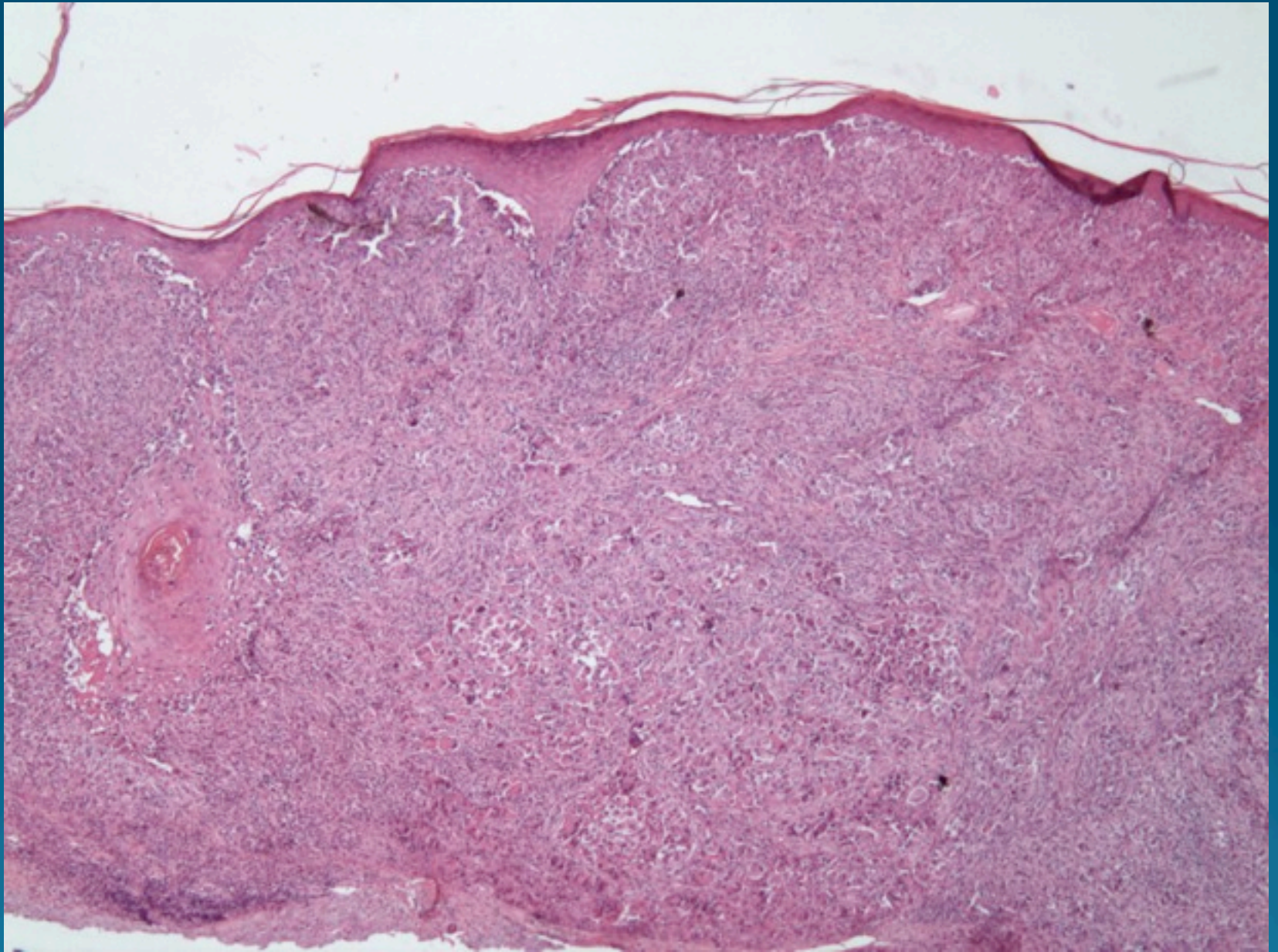
Am J Surg Pathol. 1999 Dec;23(12):1506-13

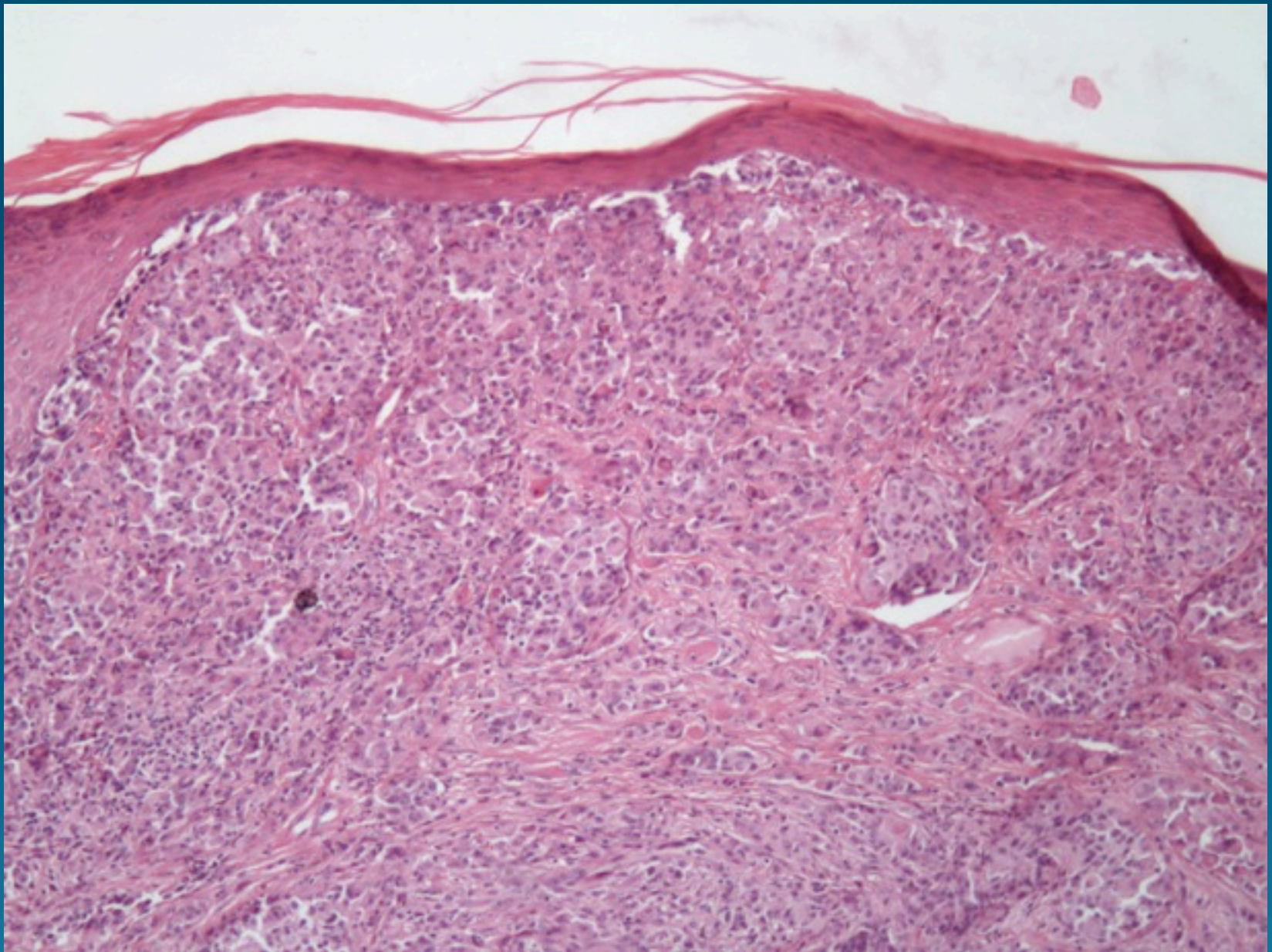
**Cutaneous melanoma with myxoid features: twelve cases with differential diagnosis.**

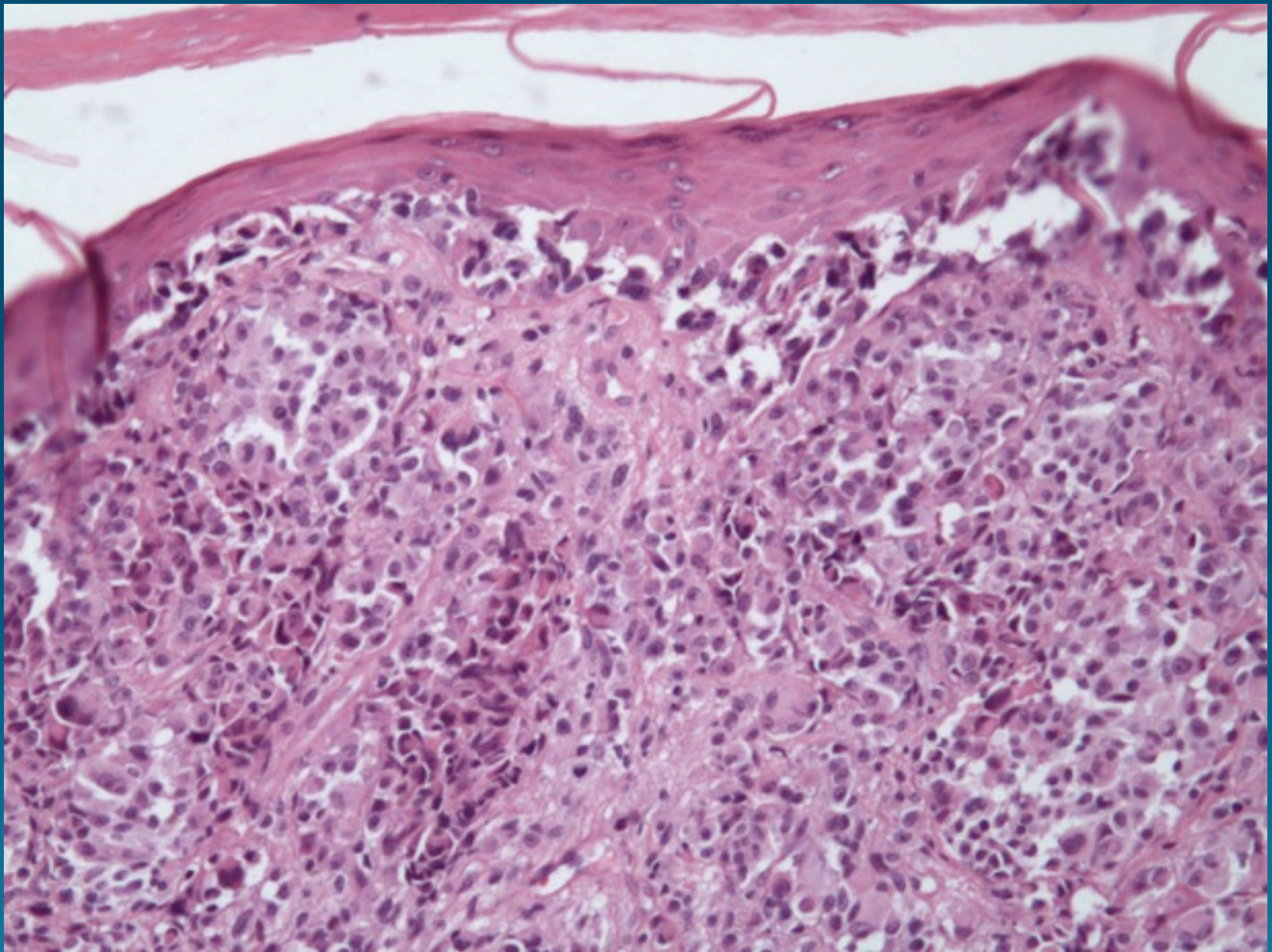
**Hitchcock MG, McCalmont TH, White WL.**

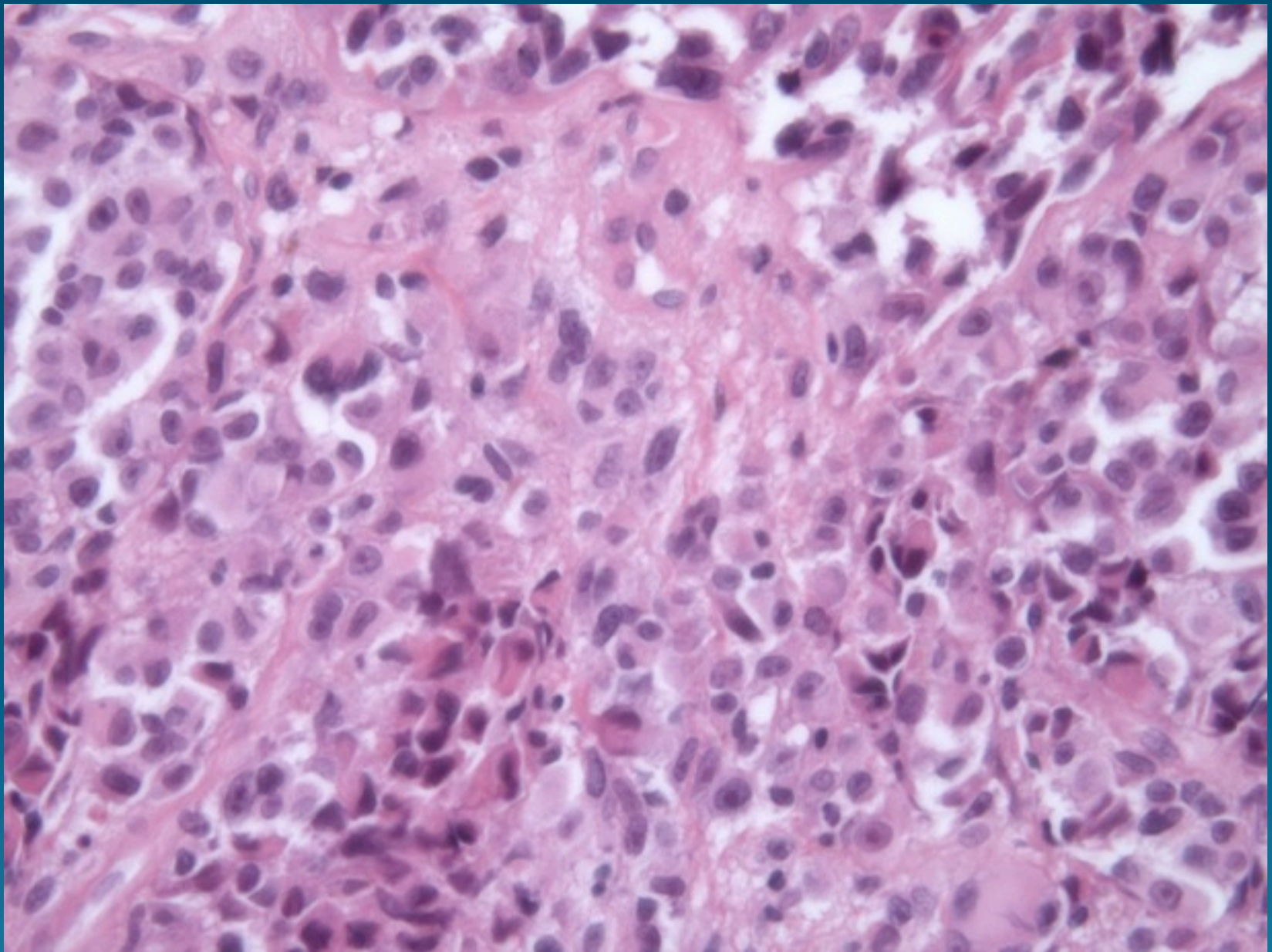
Department of Pathology, The Wake Forest University School of Medicine, Winston-Salem, North Carolina, USA.

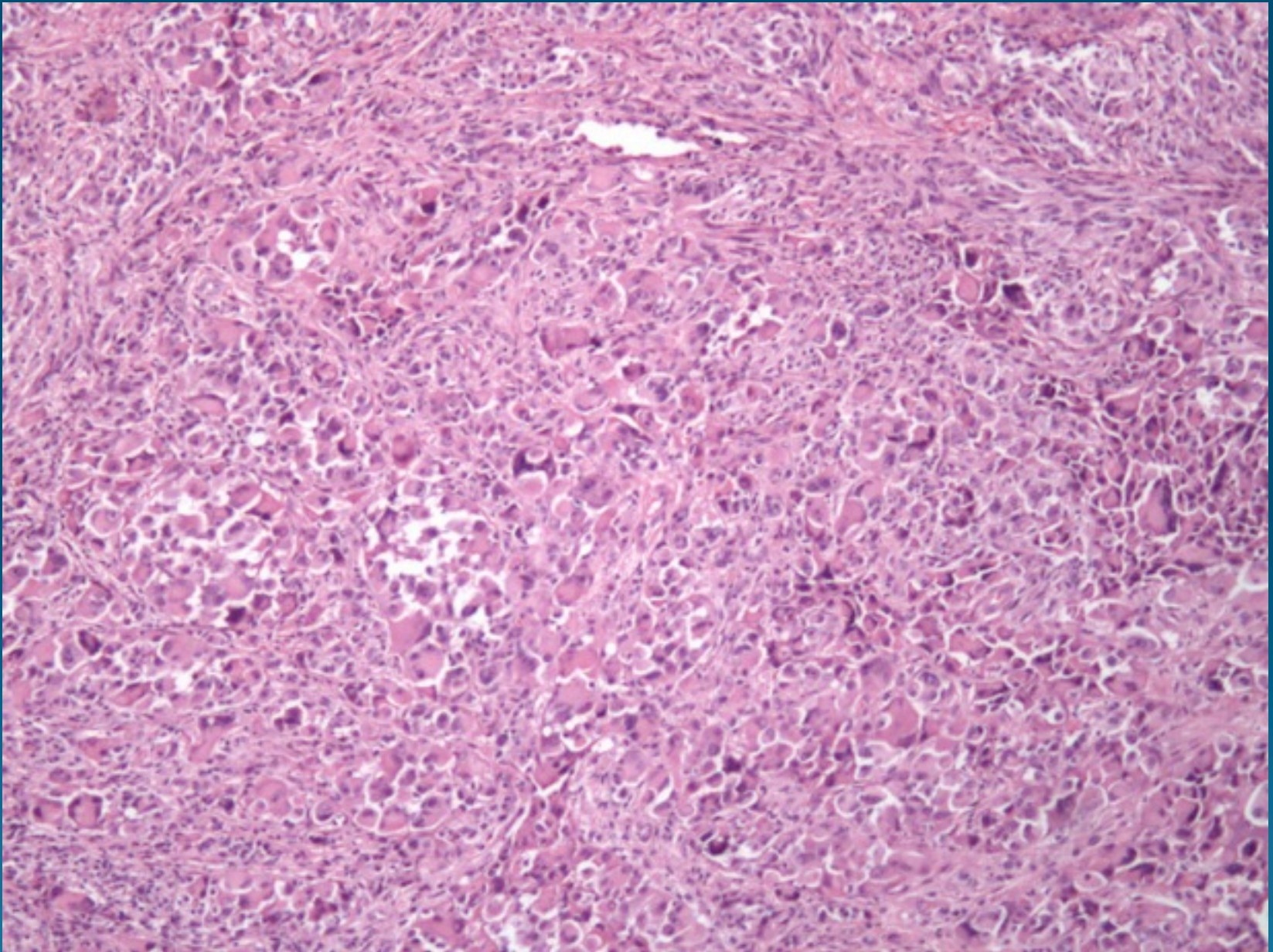


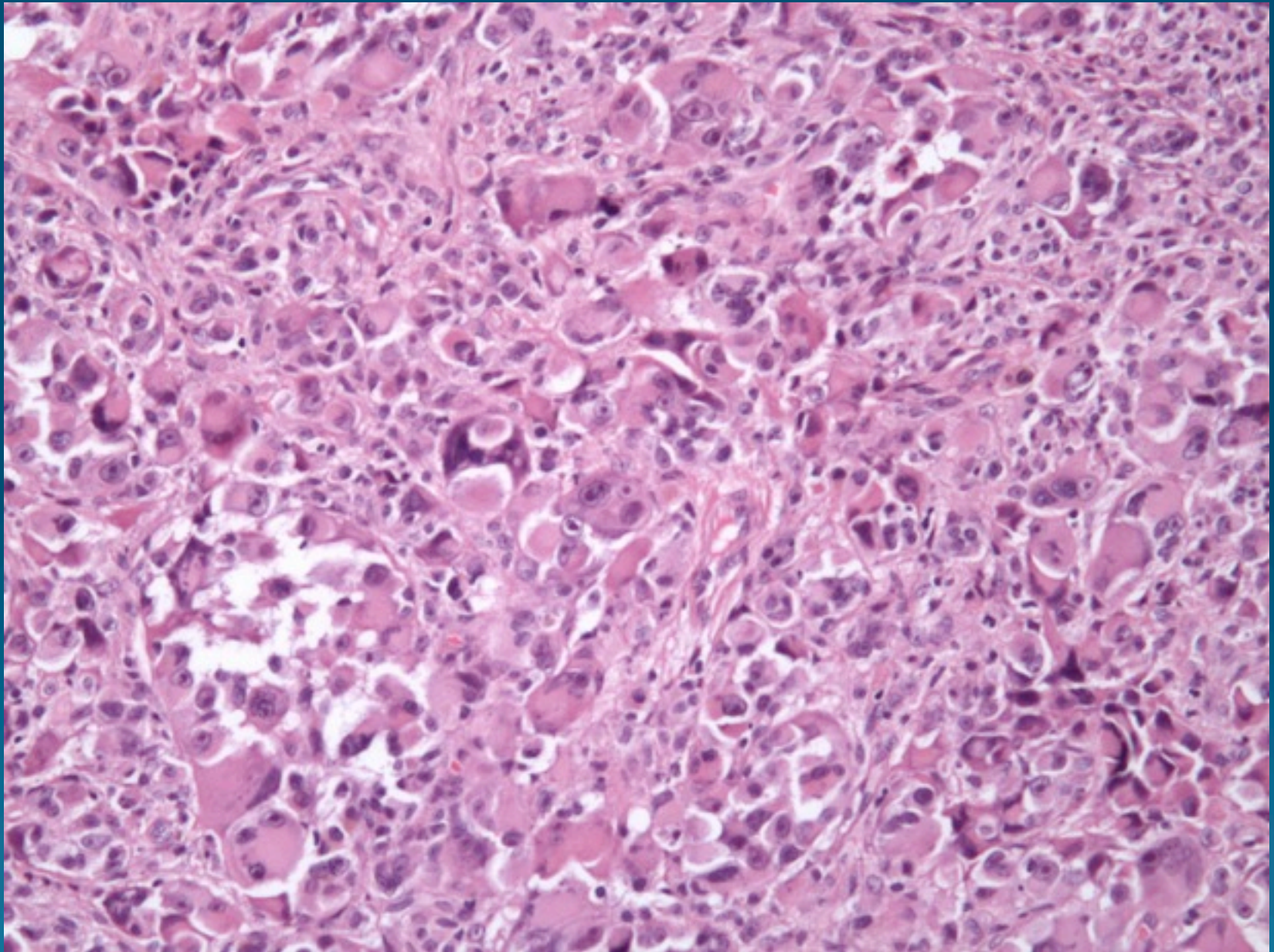


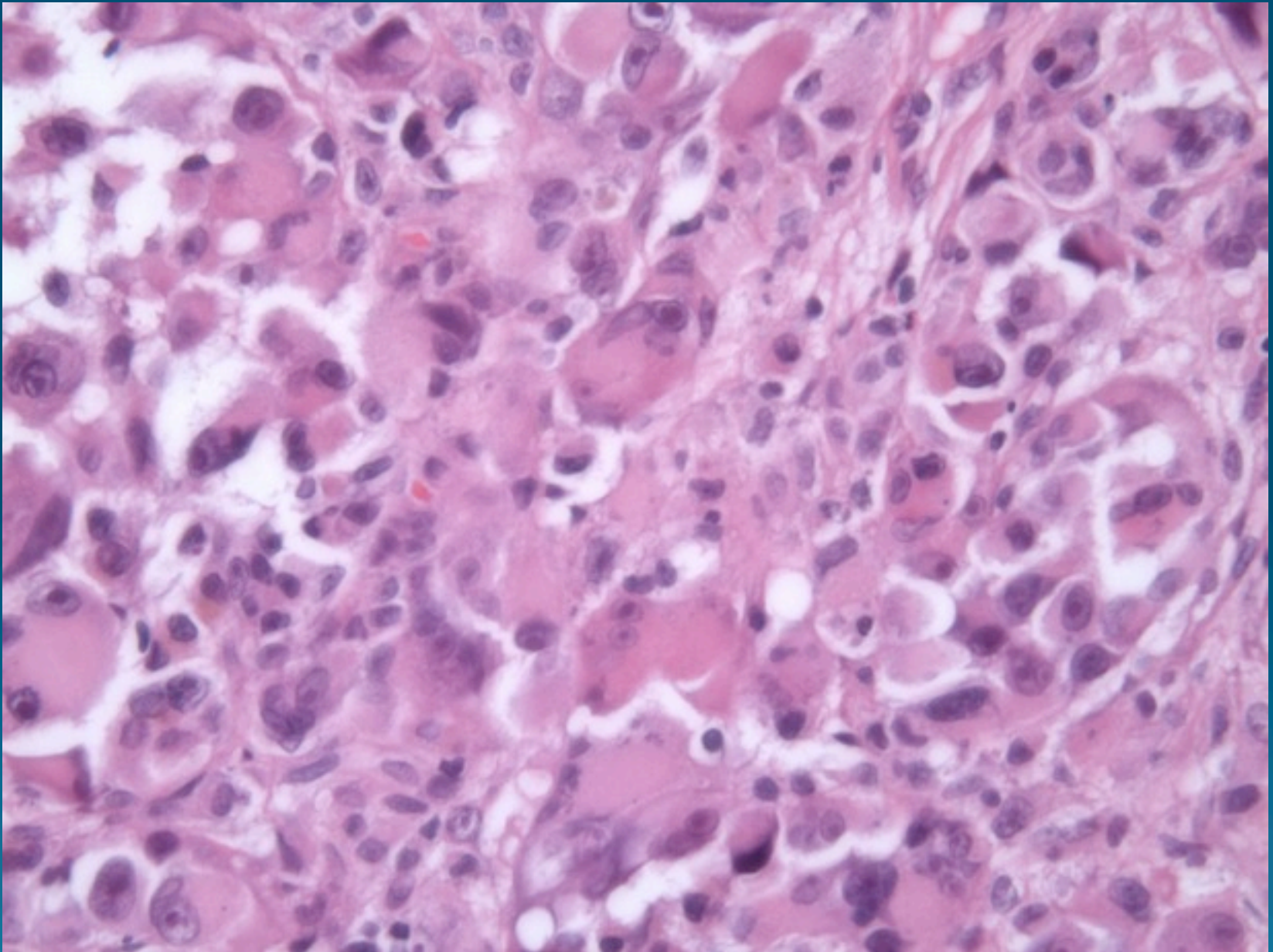








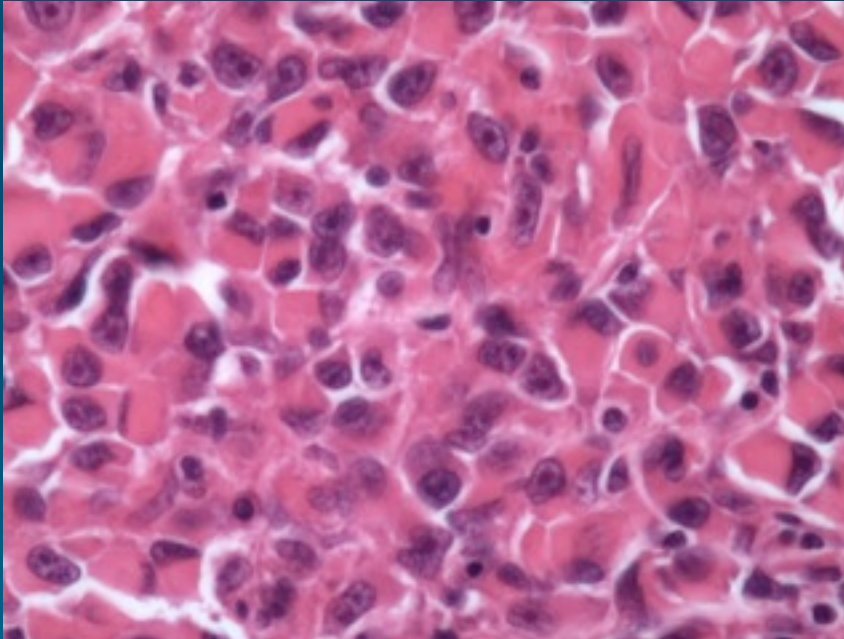




# Melanoma with Rhabdoid Features



# Histopathology



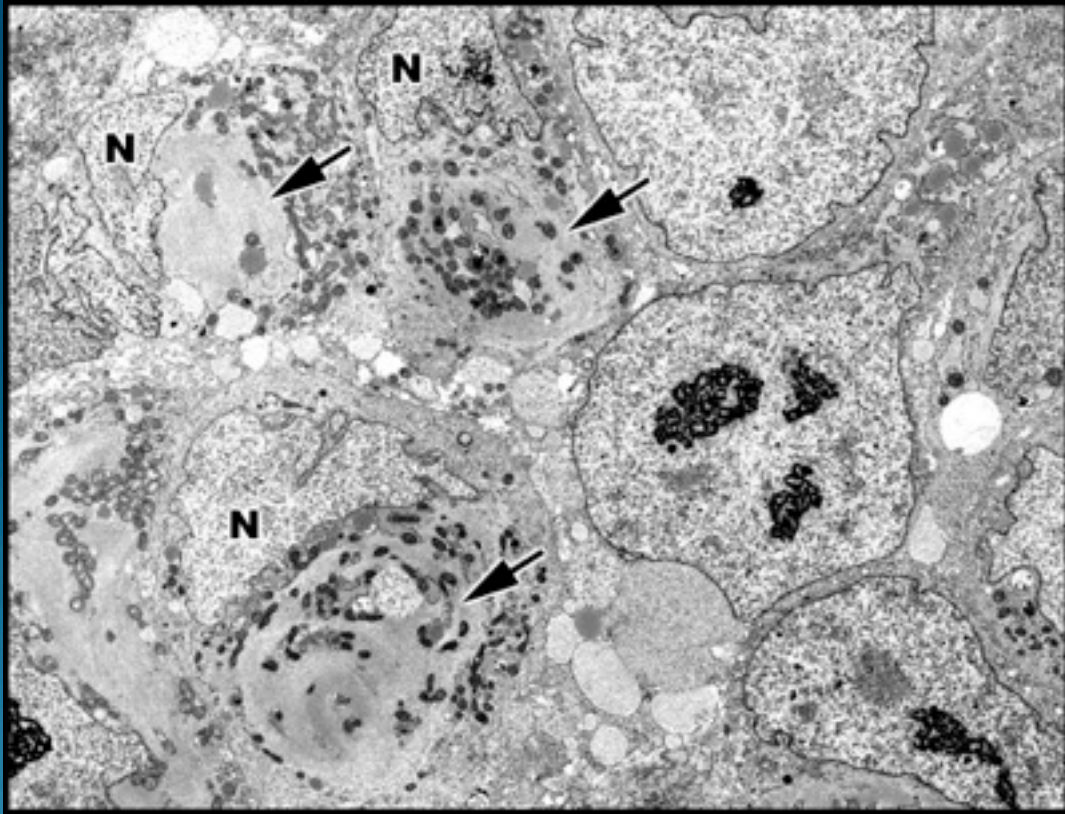
- Abundant eosinophilic cytoplasm
- Cytoplasmic inclusions
- EM with cytoplasmic whorls of intermediate filaments containing entrapped rough endoplasmic reticulum, mitochondria, and lipid
- DDX: Metastatic rhabdoid tumors

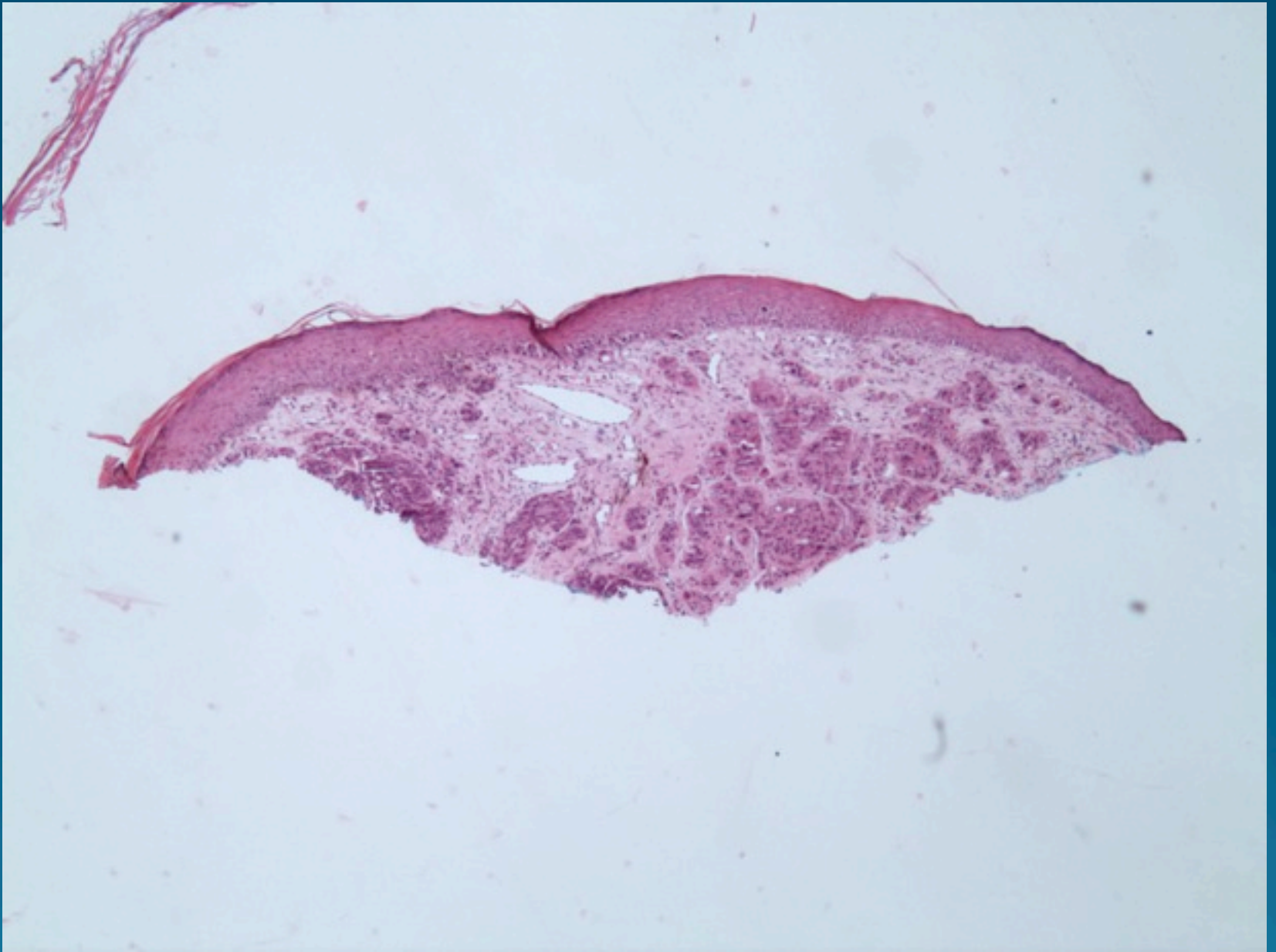
Arch Pathol Lab Med. 2004 Jun;128(6):686-8

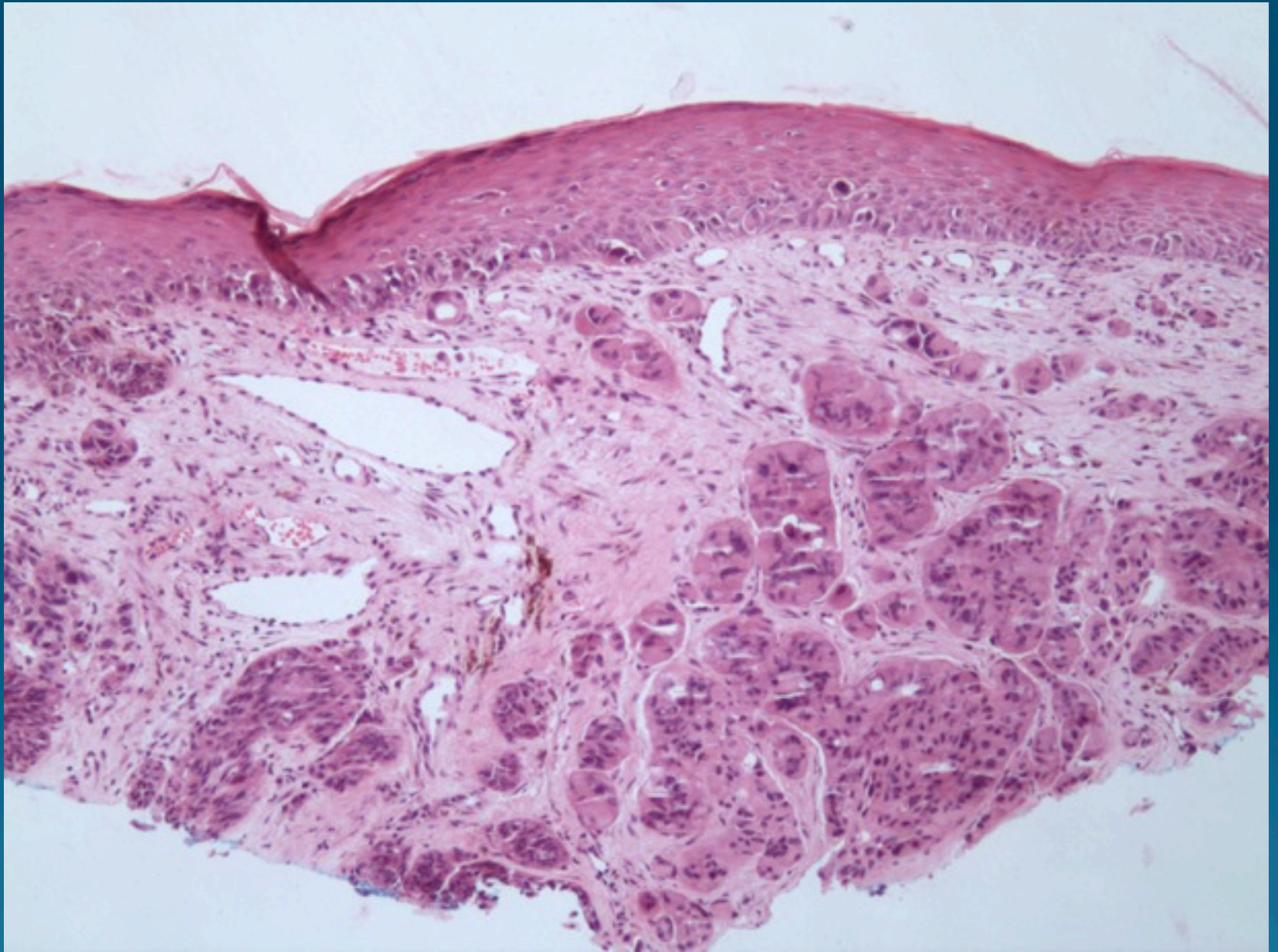
**Malignant melanoma with a rhabdoid phenotype: histologic, immunohistochemical, and ultrastructural study of a case and review of the literature.**

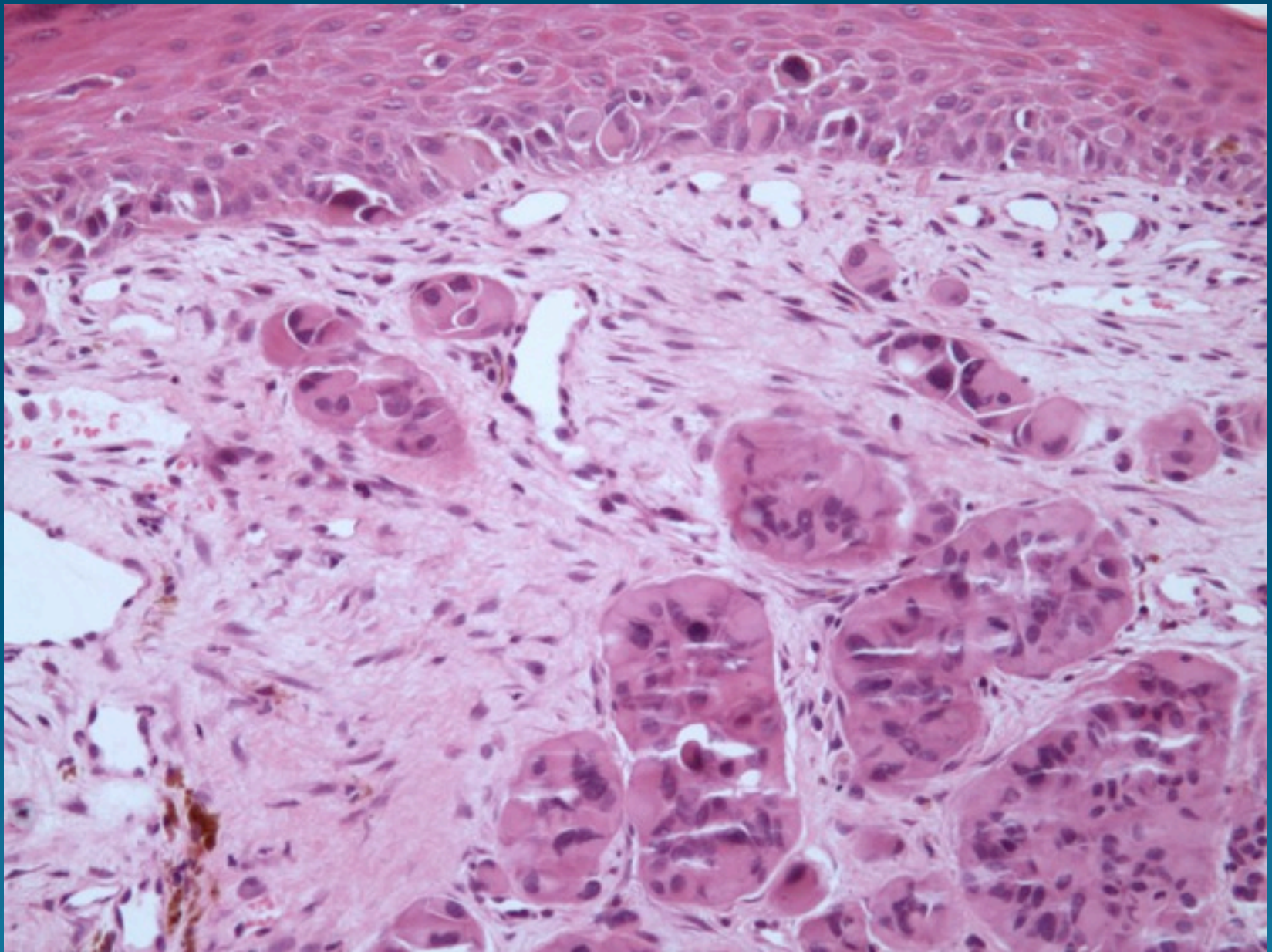
**Abbott JJ, Amirkhan RH, Hoang MP.**

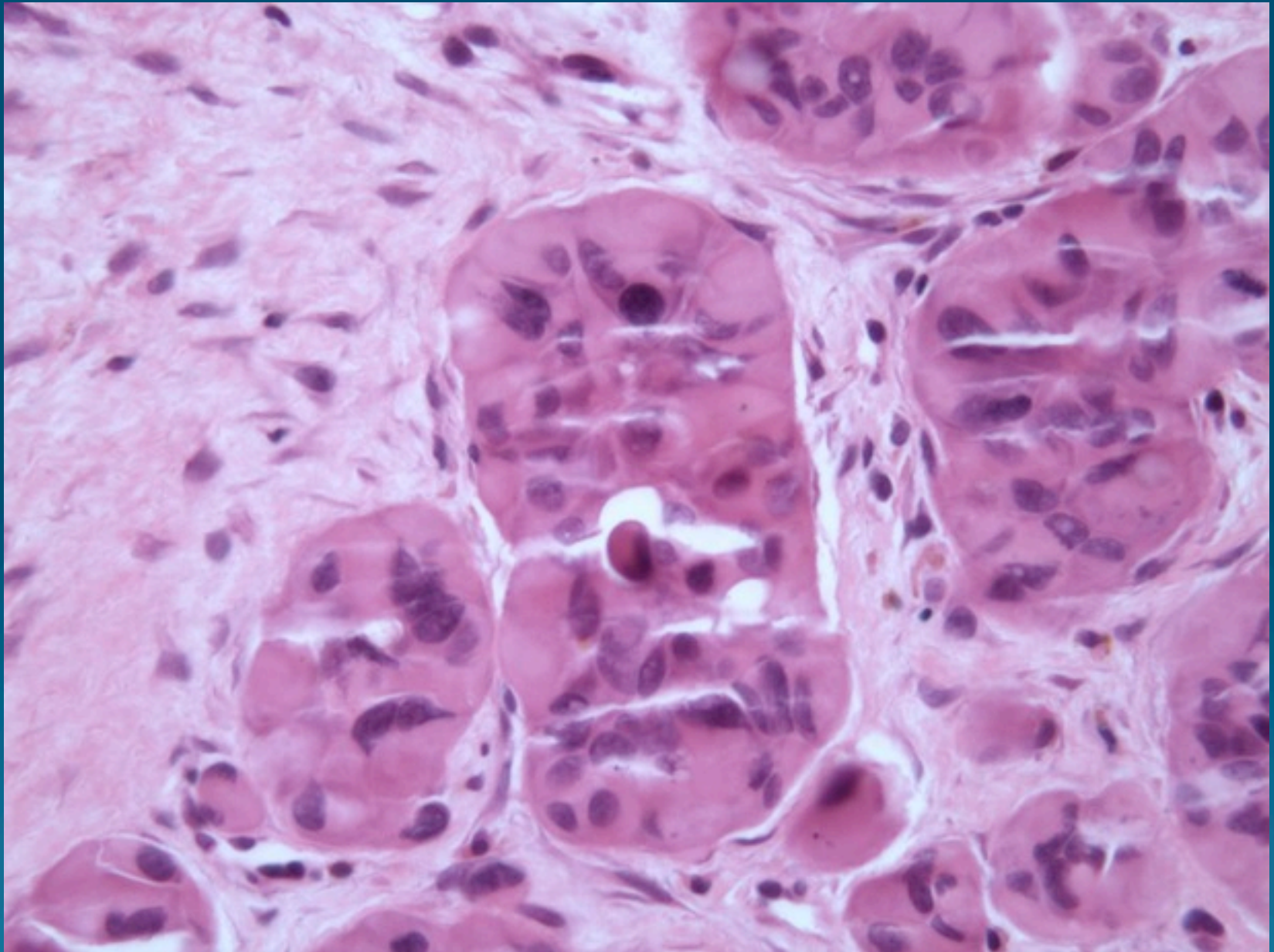
Department of Pathology, University of Texas Southwestern Medical Center, Dallas 75390-9073, USA.

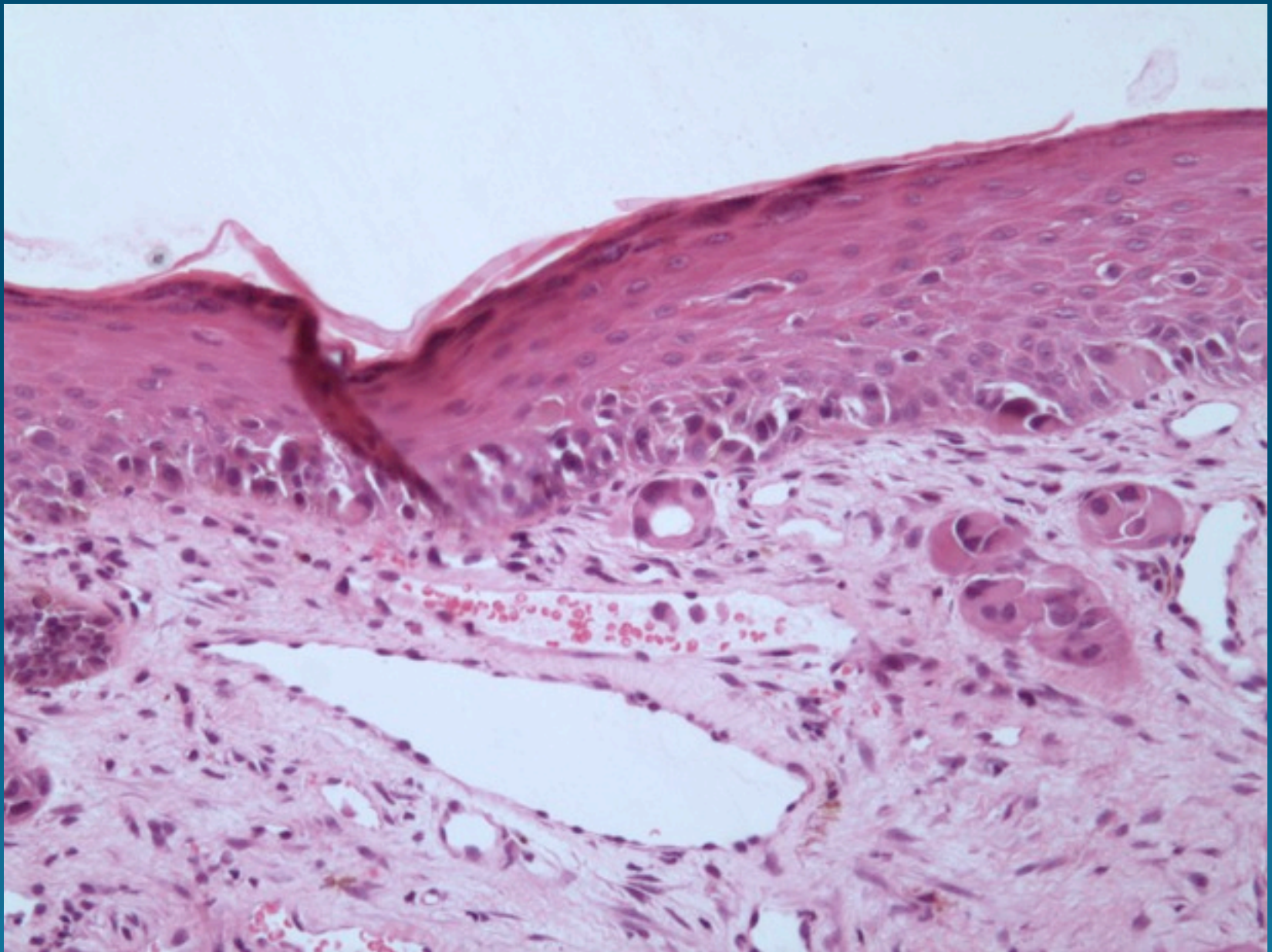


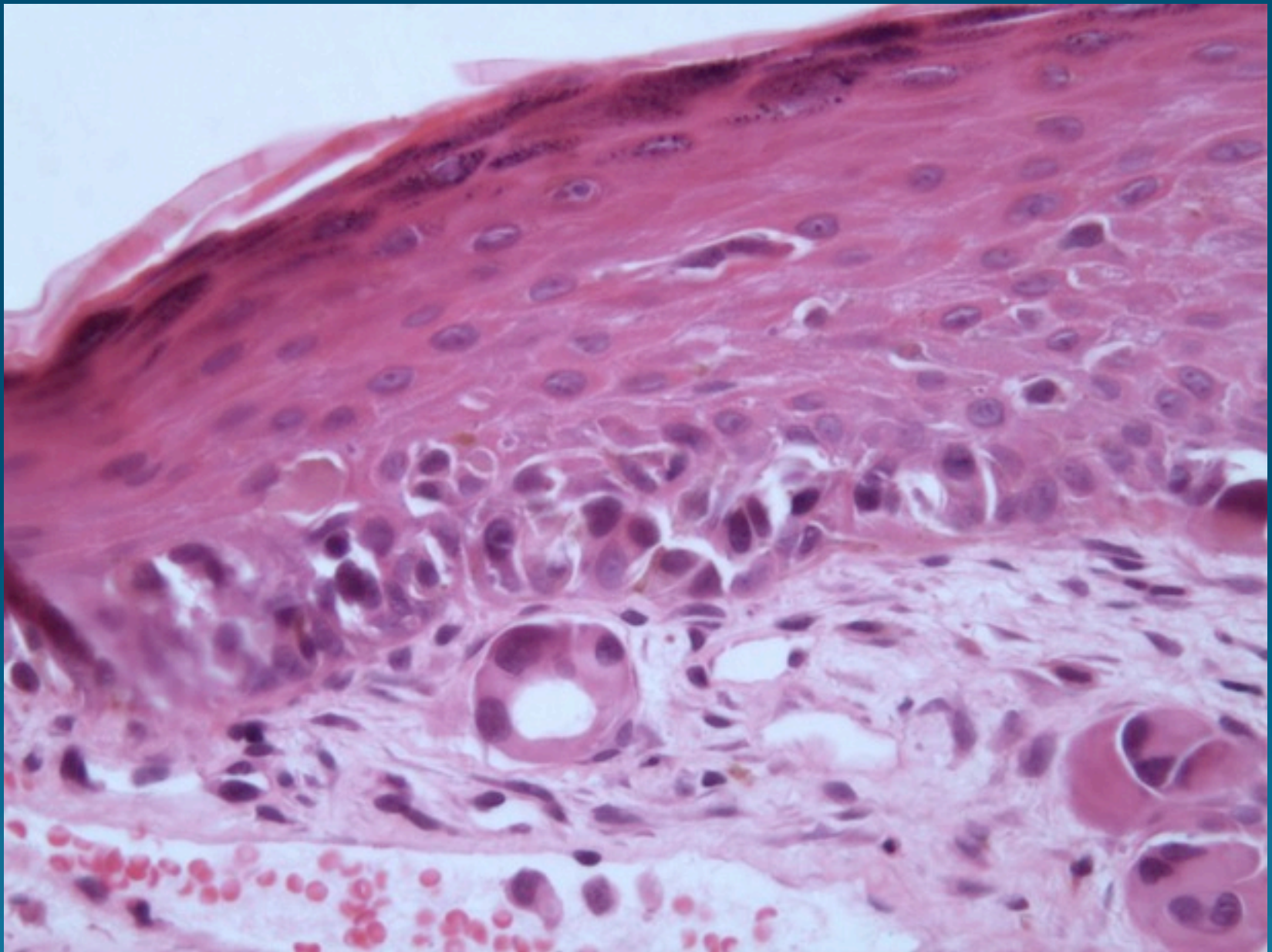




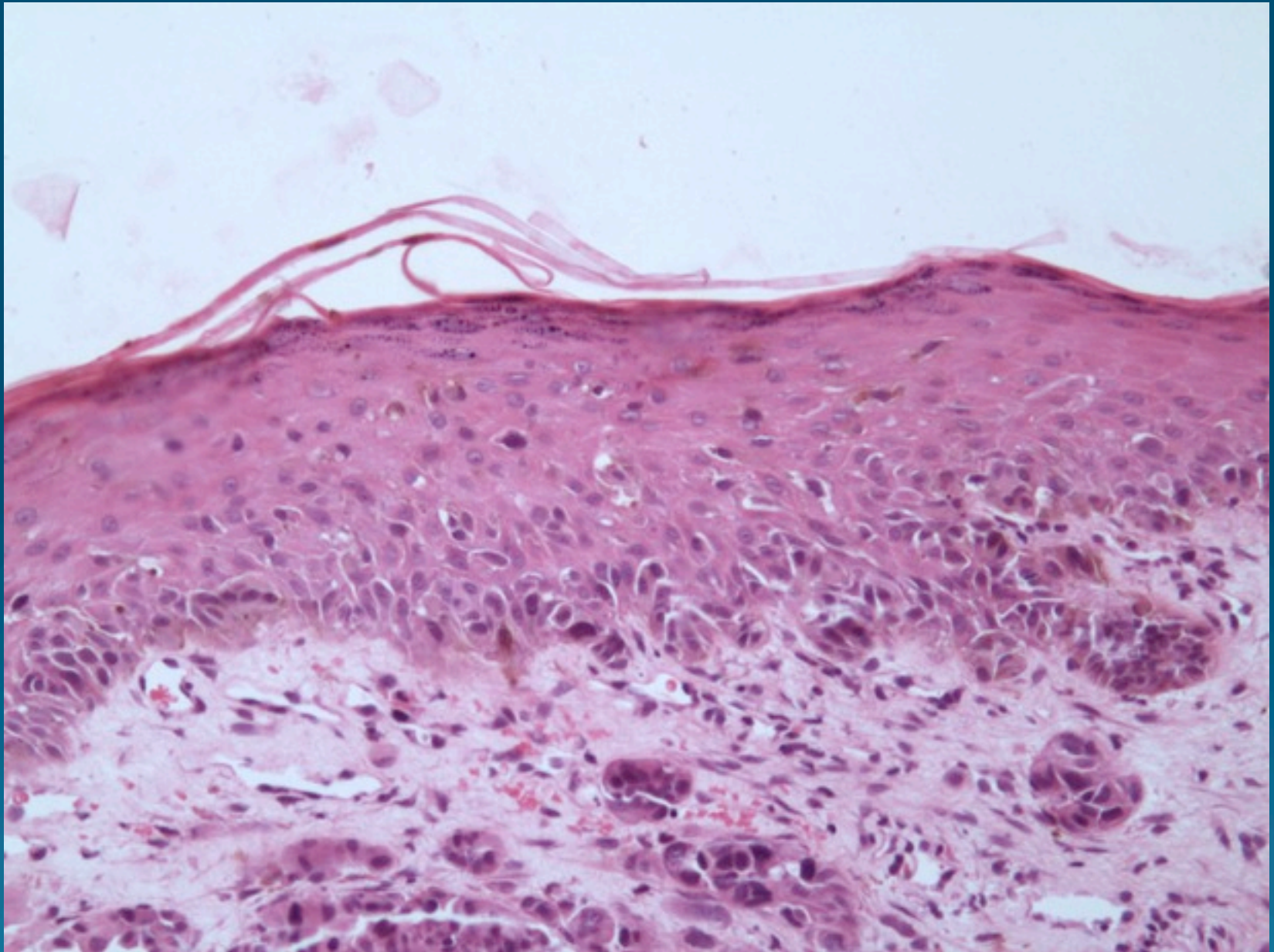


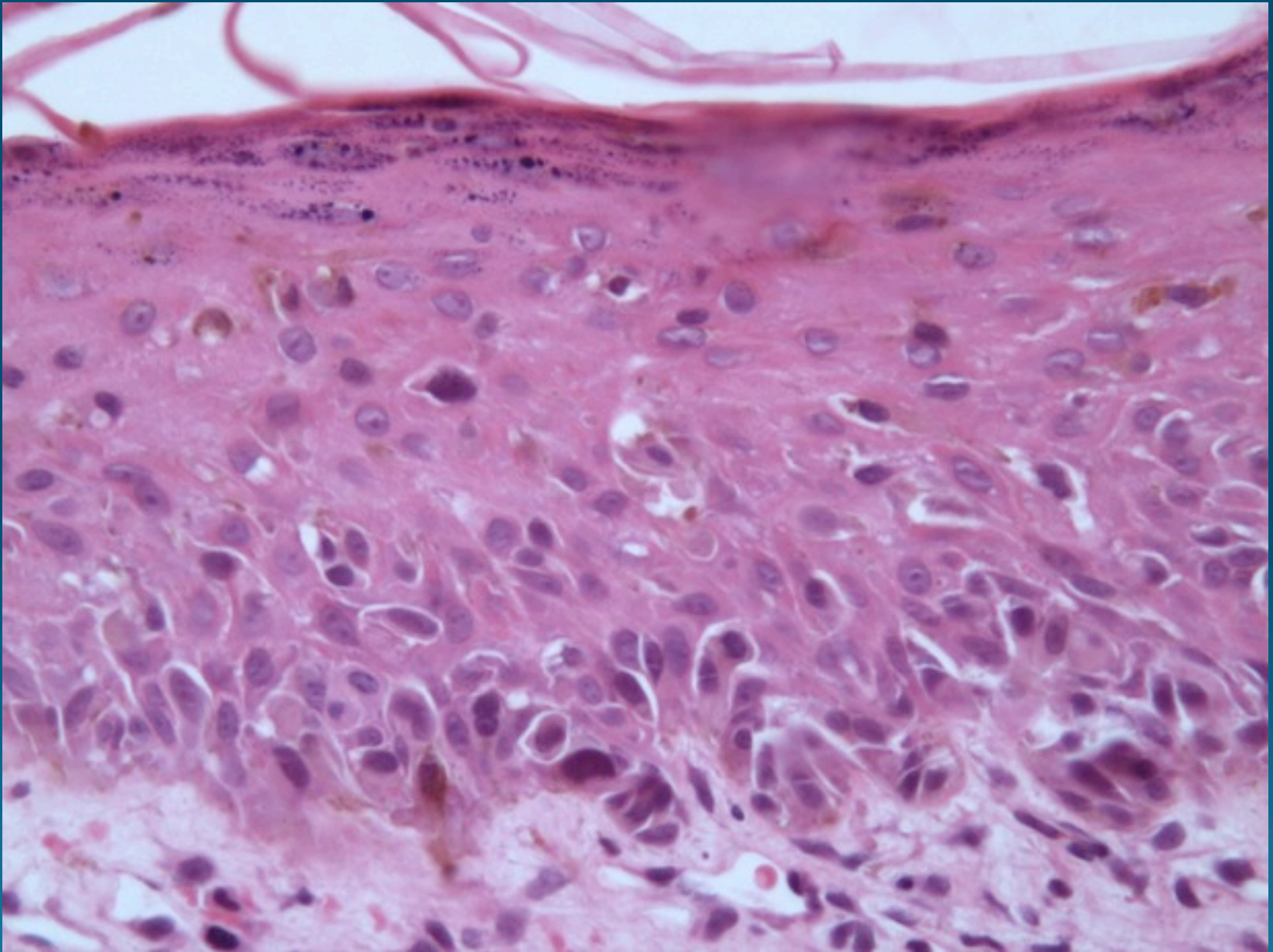






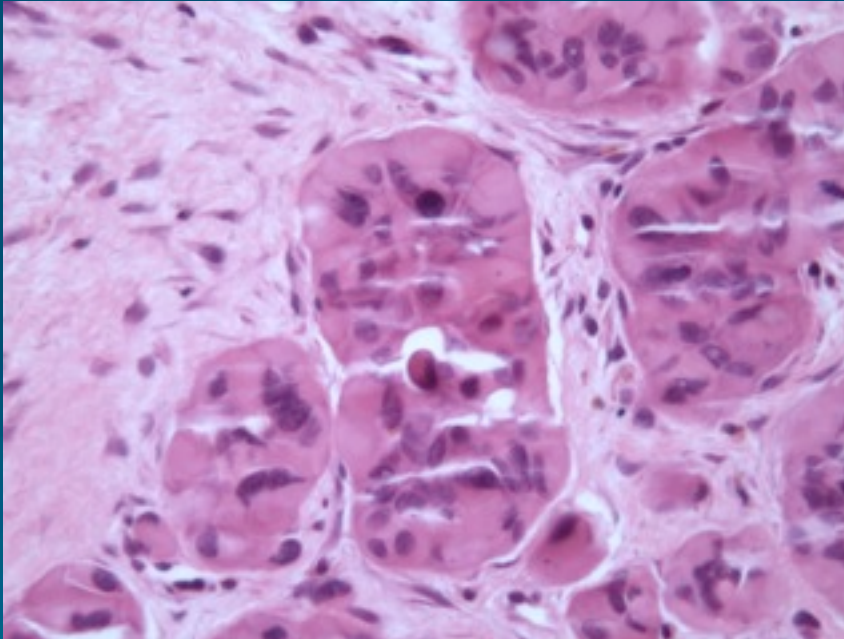






# Melanoma with Adenoid Features

# Histopathology



- Pseudoglandular pattern
- Often amelanotic
- May have large eosinophilic abundant cytoplasm
- IPOX may be necessary
- DDX: AdenoCA, BCC

