

# The role of in vivo reflectance confocal microscopy for the diagnosis of challenging macule of the face

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## INTRODUCTION.

Melanoma located on the face always represents a diagnostic challenge clinically and dermoscopically. We report a case of lentigo maligna (LM) showing no clinically obvious suspicious signs.

## CASE REPORT.

A 47-year old man presented at our clinic for laser removal of cosmetically cumbersome brownish macules on his face. A suspicious macule on the tip of the nose was noted (Fig. 1.). According to the clinical examination no obvious melanoma signs were found. During examination with the dermatoscope, a structureless brownish color pigmentation and light grey color around several hair follicles were present (Fig. 2.). RCM examination revealed atypical dendritic melanocytes around hair follicles (Fig. 3.). Based on the findings in RCM, a total surgical excision with 1mm margin was performed and final diagnosis of LM was confirmed by histopathology. Because patient refused to do a re-excision, he underwent adjuvant therapy with Imiquimod 5% cream once daily for 6 weeks. After one year of follow up, no melanoma recurrence signs were noted.



Figure 1.



Figure 2.

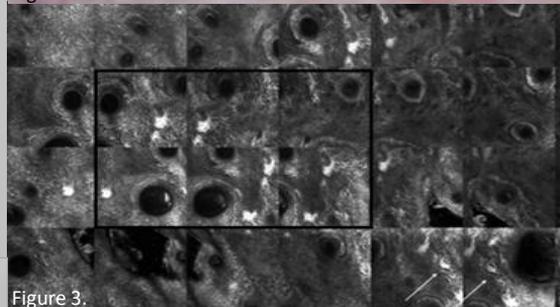


Figure 3.

## CONCLUSION.

In the presented case melanoma did not show any characteristic pattern of melanoma and with the dermatoscope the only subtle suspicious clue was presented by greyish color structures around the follicles. This clue shows high sensitivity to malignancy (85,1%), but quite low specificity (39,7%) [1]. RCM is a non-invasive imaging technique, allowing us to decrease the number of unnecessary surgical interventions as well as to improve early detection of melanoma. The combination of both techniques – dermoscopy and RCM showed even higher diagnostic accuracy compared to dermoscopy and RCM alone [2], as is the case reported here.

## REFERENCES.

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2. Cinotti E, Fiorani D, Labeille B, et al. The integration of dermoscopy and reflectance confocal microscopy improves the diagnosis of lentigo maligna. *J Eur Acad Dermatol Venereol.* 2019;33(10):e372–e374.

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