



FIGURE 76e-24 Metastatic carcinoma to the skin is characterized by inflammatory, often ulcerated dermal nodules.



FIGURE 76e-25 Keratoacanthoma is a low-grade squamous cell carcinoma that presents as an exophytic nodule with central keratinous debris.



FIGURE 76e-26 Squamous cell carcinoma is seen here as a hyperkeratotic, crusted, and somewhat eroded plaque on the lower lip. Sun-exposed skin of the head, neck, hands, and arms are other typical sites of involvement.



FIGURE 76e-27 Actinic keratoses consist of hyperkeratotic erythematous papules and patches on sun-exposed skin. They arise in middle-aged to older adults and have some potential for malignant transformation. (Courtesy of Robert Swerlick, MD; with permission.)

MELANOMA AND BENIGN PIGMENTED LESIONS

(Figs. 76e-28 to 76e-33) As the prognosis of melanoma is related primarily to the microscopic depth of invasion, and as early detection with surgical treatment can be curative in a high percentage of patients, it is essential that all clinicians acquire some facility in evaluating pigmented lesions. Three clinicopathologic subtypes of melanoma—superficial spreading, lentigo maligna, and acral lentiginous melanoma—typically display features noted in the “ABCD rule”: *asymmetry* (one half of the lesion varies from the other half); *border irregularity* (the circumferential border exhibits an irregular, sometimes jagged appearance); *color* (there is uneven coloration and tone to the pigmented lesion, with various shades of brown, black, red, and white in different areas); and *diameter* (the diameter is typically >6 mm). The more uncommon subtype, nodular melanoma, may not manifest all these features but rather may present as a more symmetric, evenly pigmented, or amelanotic lesion. Dysplastic (atypical) melanocytic nevi may occur as solitary or multiple lesions as well as in the setting of familial melanoma. These nevi display some degree of asymmetry, border irregularity, and color variation. Ordinary nevi may be acquired or congenital and are quite common.



FIGURE 76e-28 Nevi are benign proliferations of nevomelanocytes characterized by regularly shaped hyperpigmented macules or papules of a uniform color.