

IMAGES IN CLINICAL MEDICINE

Oral Acanthosis Nigricans



Christina Schnopp, M.D.
Julia Baumstark, M.D.

Biederstein Technical University Munich
D-80802 Munich, Germany
nina.schnopp@lrz.tu-muenchen.de

A 44-YEAR-OLD WOMAN PRESENTED WITH INCREASING ORAL PAPILOMATOSIS, predominantly on the lips and less pronounced on the tongue and buccal mucosa. The lips showed filiform papillomas in a symmetrical distribution (Panel A). The tongue was thickened and furrowed. A biopsy was performed, and histologic analysis revealed acanthosis and papillomatosis, hyperkeratosis, increased dermal pigmentation, and a dermal lymphohistiocytic infiltrate (Panel B and inset, arrows). No epidermal inclusion bodies were seen, and polymerase-chain-reaction analysis of the specimen did not detect any human papillomavirus DNA. The patient had received the diagnosis of advanced gastric adenocarcinoma 1 year earlier and had been treated with surgery and palliative radiochemotherapy. Three months before the diagnosis of gastric adenocarcinoma was established, she had noticed a generalized darkening of the skin and small, velvety plaques on her neck. Acanthosis nigricans is usually related to benign conditions, especially endocrinopathies. Involvement of mucous membranes is rare and points toward acanthosis nigricans maligna, a paraneoplastic syndrome with which gastrointestinal adenocarcinoma is commonly associated. Acanthosis nigricans maligna may precede the diagnosis of the tumor.

Copyright © 2007 Massachusetts Medical Society.