

# Forearm Tumor: A Common Diagnosis, An Uncommon Presentation

**Issoual K\*, Lamrabet S, Couissi I, Baybay H, Elloudi S and Mernissi FZ**

Departement of Dermatology, Hassan II Hospital University, Fez. Morocco

**\*Corresponding author:** Khadija Issoual, Hassan II Hospital University, N44, Lot OUED EDDAHAB, Elhajeb 51000 El Hajeb, Morocco, Tel: 021265855085268; Email: khadijaissoual@gmail.com

## Image Article

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## Abstract

Leishmaniasis is a parasitic disease with cutaneous tropism, it is a common affection with broad clinical polymorphism, the tumorless aspect is rare, it mimics real tumor pathologies. We herein report a rare case of cutaneous pseudo-tumor leishmaniasis.

**Keywords:** Leishmaniasis; Mycoses; Ulcerated tumor

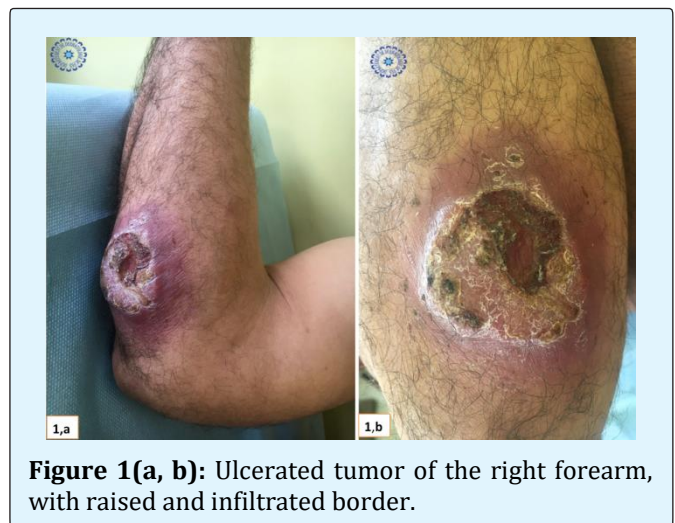
50-year-old patient, with no notable pathological history, a farmer; who consults for an ulcero-bourgenant tumor, painless evolving for 1 year in a condition of conservation of the general state. On clinical examination we noted an erythematous ulcerating Burgundian tumor, measuring 5 cm, scamous surface covered with some yellowish and hemorrhagic scales, well limited, raised border, indurated and infiltrated painlessly, and bleeding on contact, in dermoscopy we found erythematous background, point and linear vascularization, scales, and central ulcerations, there was no palpable inguinal lymphadenopathy and the rest of the examination was normal.

In front of this aspect we have to think about tumoral pathology; epidermal carcinoma, cutaneous B-cell lymphoma, or infetious diseases like syphilitic or tuberculous gumma or a deep mycoses.

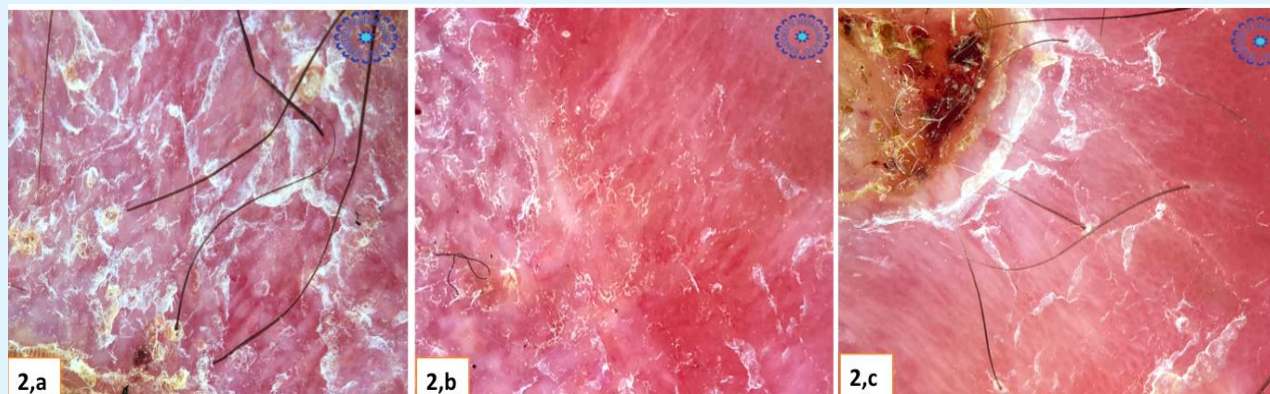
**The biopsy was in favor of leishmaniasis:** The diagnosis was *pseudo-tumoral cutaneous leishmaniasis*. Given the size and the periarticular location, a systemic treatment with Sodium stibogluconate was indicated, at a

dose of 20 mg / kg / day for 20 days, combined with local treatment with aureomycic topical ointment.

The evolution was favorable; there was no recurrence of the disease with a decline of one year.



**Figure 1(a, b):** Ulcerated tumor of the right forearm, with raised and infiltrated border.



**Figure 2(a,b,c):** Dermoscopic images of the lésion : erythematous background, point and linear vascularization, scales and yellowish Crusts , with central ulcerations.

