

Dynamic Optical Coherence Tomography and Reflectance Confocal Microscopy of Basal Cell Carcinoma of the Nipple-Areola Complex

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Abbreviated Abstract

Reflectance confocal microscopy (RCM) and dynamic optical coherence tomography (D-OCT) are noninvasive method for skin assessment, especially in particular population such as pregnant women, helping in diagnosis, and treatment choice



Image gallery

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Abstract

Dear Editor,

a 40-year-old pregnant woman presented to our non-invasive diagnostic outpatient clinic for the evaluation of an ugly lesion on her right nipple-areola complex (NAC). Physical examination showed a pink-brown plaque of 2x1.8 cm in diameter. Dermoscopy revealed a pigmented pattern resembling leaf-like areas. To avoid unnecessary surgical removal, dynamic optical coherence tomography (D-OCT) and reflectance confocal microscopy (RCM) were performed, both showing tumor islands (1,2). Thanks to non-invasive imaging, a diagnosis of pigmented BCC was made, considering its indolent biologic behaviour, definitive surgery could be scheduled after delivery.

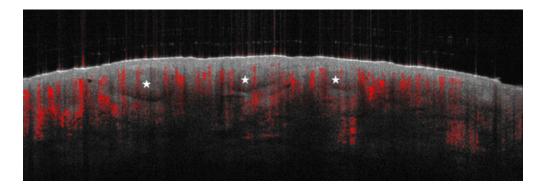
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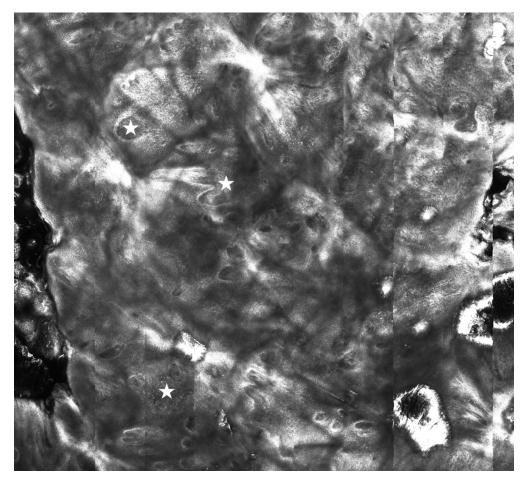




Macroscopic aspect: plaque measuring 2 x 1.8 cm on the right areola extending to the surrounding skin. $1646x1374mm~(38 \times 38~DPI)$



D-OCT showed superficial hyporeflective ovoid areas (stars), representing likely tumor islands. $24x8mm \; (600 \; x \; 600 \; DPI)$



RCM showed multiple small tumor islands (stars) with palisading of the nuclei at the periphery and clefting. Of special interest is their superficial position.

2116x1936mm (72 x 72 DPI)