# **Clinics of Oncology**

#### **Clinical Image**

### Perianal Basal Cell Carcinoma: A Rare Localization

#### Lahsaini S\*, Ennouhi M and Moussaoui A

Plastic And Repair Surgery Department, Moulay Ismail Military Hospital -Meknes- -Morocco

#### \*Corresponding author:

Lahsaini Sara,

Plastic And Repair Surgery Department, Moulay Ismail Military Hospital, Meknes, Morocco, E-mail: sara.lahsaini@usmba.ac.ma/ dr.sara.lahsaini@gmail.com Received: 22 Dec 2022 Accepted: 28 Jan 2023 Published: 06 Feb 2023 J Short Name: COO

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Anatomopathological; Perianal BCC; Urogenital

#### 1. Clinical Images

Basal Cell Carcinoma (BCC) of the perineum is rare with very few cases reported in the literature, the incriminating factors are still poorly known. The macroscopic profile of perianal BCC is uncharacteristic, sometimes leading to diagnostic error. The anatomopathological study makes it possible to differentiate BCC from other skin lesions in the region. Like the other localizations, the perianal BCC has a good prognosis with a slow evolution, however regular fellow up is essential in order to reduce the risk of recurrence. Our observation illustrates a rare but not exceptional localization.

This is a 78-year-old man, who consulted for a weeping lesion of the perineum evolving for eighteen months without any associated symptoms. Physical examination revealed a vegetative tumor, rounded, well limited, 3cm long axis at the level of the perineum on the right side of the urogenital triangle (Figure 1). There was no palpable inguinal lymphadenopathy or other skin location. The proctologic examination is normal. A biopsy was performed which came back in favor of basal cell carcinoma, followed by surgical excision and suturing of the remaining loss of substance. The pathological examination showed a malignant tumoral proliferation in the dermis made up of trabeculae and tumor masses of basaloid cells with nuclei increased in volume, sometimes in mitosis. The peripheral cells present a palisade arrangement, this aspect was in favor of an infiltrative type BCC (Figure 2)[1-3].



**Figure 1:** Clinical iconography showing a rare localization with an atypical appearance, of a perianal basal cell carcinoma.

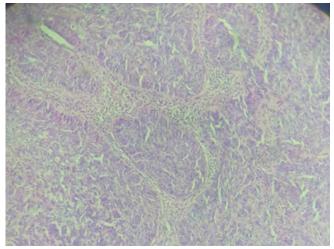


Figure 2: Histological appearance of a perianal basal cell carcinoma

#### References

- Simo AC, Jarjous N, et al. Basal cell carcinoma perianal extended to the anal canal. Clinical and Biological Gastroenterology. 2008; 32: 337-338.
- Gibson GE, Ahmed I. Perianal and genital basal cell carcinoma: A clinicopathologic review of 51 boxes. J am acad dermatol number. 2001; 45.
- 3. Montagliani L, Aubert P, Vergeau B, Rivière P, Gaudry P, Dufau JP, et al. Basal cell carcinoma perianal. Presse Med. 2004; 33: 389-90.