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ANSWER: PRIMARY RHABDOID MELANOMA (NODULAR SUBTYPE) OF THE FOOT.

Figure 1A: a pigmented cauliflower like lesion (2cm x 2.5cm) on the lateral aspect of his foot.

Figure 1B: Elevated nodular lesion in the dermis and subcutaneous tissue (insert: sheets of polygonal cells with pink cytoplasm peripherally placed nuclei with some cells showing intracytoplasmic inclusions).

The punch biopsy revealed a diagnosis of melanoma (nodular subtype). A computed tomography scan staging did not show lymphadenopathy of disease dissemination. He underwent a wide local excision and the wound defect was covered with split-thickness skin graft. Histology confirmed it to be a nodular subtype melanoma with rhabdoid features (Figure 1B; insert showing sheets of polygonal cells with pink cytoplasm peripherally placed nuclei and some cell showing intracytoplasmic inclusions), a rare form of melanoma. The final diagnosis of primary rhabdoid melanoma (nodular subtype) staged pT₄bN₀M₀.

Melanoma is the most dangerous type of skin cancer. It is important to recognise warning signs of melanoma ('**ABCDE**' mnemonic): it tends to be **A**symmetrical, has an irregular **B**order, often with multiple **C**olours, usually larger in **D**iameter, and tends to **E**volve over time (i.e. change in colour or size). There are several histological subtypes of melanoma; melanoma in-situ, superficial spreading, nodular, lentigo maligna, acral lentiginous and malignant melanoma. Nodular melanoma is the second most common subtype and commonly occurs in the 40-60 years age-group, and twice as common in men. It is often clinically described as a uniform blue-black or blue-red nodule and is known to

have rapid vertical growth. Asians have shown to have the thickest tumour for nodular melanoma.¹ Rhabdoid variant of melanoma is rare and is more aggressive.² Wide local excision is the definitive treatment for primary melanoma.³ Chemotherapy is less effective and adjuvant immunotherapy is often reserved for patients with high-risk features.⁴ Regular surveillance post-operatively is important as there is still a high risk for regional or distant relapses.

REFERENCES

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