

### Dermatoscopic patterns of dermatofibromas in Korean patients: According to the locations and the histologic subtypes

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**Background:** Various typical and atypical dermatoscopic patterns of dermatofibromas were reported.

**Objective:** To demonstrate the dermatoscopic patterns of dermatofibroma in Korean patients according to the locations and the histologic subtypes.

**Methods:** From January 2006 to July 2013, total 92 dermatofibromas from 81 patients were included in the study. In the first step, dermatoscopic features were classified into 10 patterns defining global patterns of pigmentation and scarlike patch. In the second step, dermatoscopic features unclassifiable in the first step were classified into 6 patterns defining local appearance. In the final step, dermatoscopic feature were grouped and newly named into 9 patterns. In the first step, the frequency of dermatoscopic features was analyzed with the Fisher exact test according to the locations and the histologic subtypes.

**Results:** In the first step, the most common dermatoscopic patterns were peripheral homogeneous pigmentation and central white scarlike patch and atypical pattern, followed by total delicate pigment network, multiple white scarlike patches, peripheral delicate pigment network and central white scarlike patch, total homogeneous pigmentation, total white scarlike patch, and so on. In the second step, linear irregular crypts were the most frequently observed, and it was followed by erythematous homogeneous area surrounding the white patch, globules in the scarlike area, and so on. In the third step, vascular, targetoid, reverse targetoid, atypical with crust, atypical with scale, crater, glass bead, gravel, blue stripe were newly defined. According to the site, the most common pattern was total delicate pigment network and peripheral homogeneous pigmentation and central white scarlike patch for lower extremities, atypical for upper extremities and buttock, multiple white scarlike patches for trunk, peripheral delicate pigment network and central white scarlike patch, peripheral homogeneous pigmentation and central white scarlike patch for head and neck. The frequency of dermatoscopic patterns according to histologic subtype showed no significant differences.

**Conclusion:** The frequent dermatoscopic patterns of dermatofibromas in Korean patients showed difference from the previously reported studies.

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## 2012

### Eccrine porocarcinoma of scalp: Case report and literature review

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An eccrine porocarcinoma is a rare neoplasm of the eccrine gland, more explicit, it comes from the intraepidermal and upper dermal eccrine duct. It represents between 0.005% up to 0.01% of all skin tumors. Without a specific etiology, it may appear from novo or as spontaneous as a malignant transformation of a benign dermatosis. Although it is commonly found in older population without sex predilection, appears slightly elevated in women at some measures. This neoplasm is usually located in pelvic limbs (50%), being knees the most predominant. It rarely occurs on scalp, face and ears (20%), barely in upper extremities (11%) and hardly in the trunk or abdomen (9%). Morphology is not characteristic; it can present as a verrucous plaque, a polypoid growth or an ulcerative lesion of long duration. It has local recurrence of 25%, and metastasis to skin, as well as local lymph nodes or systemic organs. Histopathologic appearance will present an asymmetrical tumor, with cords and lobules of polygonal cells, affecting the epidermis or might be extended into dermis. There might be acanthosis and spiraling ductular structures. Immunohistochemical is positive to p53, angiotensin I receptors and carcinoembryonic antigen. Best suggested treatment is wide local excision (2-cm margin); some have proposed Mohs micrographic excision with successful outcome in local involvement. It has been shown to be curative in 70% to 80% of all treatments made. Survival rate in patients with metastasis is 5-24 months. A case of eccrine porocarcinoma is exhibit, which is a rare neoplasm in our country and non-frequently worldwide. A 77-year-old male, who had a pedunculated tumor with 20 years of evolution, in the occipital scalp, referring exponential growth the last 4 months. The dermatosis presented no local or systemic extension. Furthermore, histopathologic studies showed a tumor mass that had a connection to the epidermis. This tumor was formed by basaloid cells, glandular lumen and necrotic foci. Treatment was applied as an extensive local excision without evidence of recurring at the presenting time.

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## 1564

### Educational effects of a monthly web-based journal club on dermatologic surgeons

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**Introduction:** In addition to the educational challenges faced by all physicians (such as an ever-expanding body of literature), academic dermatologic surgeons confront the added challenge of "intellectual isolation" imposed by often serving as one only a few members (or even the sole representative) of their specialty at a given institution. Accordingly, a monthly online journal club for dermatologic surgeons serves as an interactive forum for discussion of important articles to facilitate high-level exchange of ideas and thus improve dermatologic surgical education.

**Methods:** A 30-minute monthly web-based journal club was begun for members of the APD surgeons group via the GoToMeeting teleconferencing platform. 5-6 relevant, high-quality articles are culled from the previous month's literature and are each presented formally for 2-3 minutes followed by 2 minutes of discussion. Participants are surveyed after each session with respect to educational objectives and outcomes.

**Results:** 14 months of survey data have been collected. The average number of participants each month =  $17.4 \pm 3.5$ , and the average number of respondents each month =  $4.71 \pm 2.4$  (average response rate [%] =  $26.9 \pm 13.1$ ). 60.8%  $\pm$  22.1% of respondents reported that at least one article/month would change their practice, and 40.9%  $\pm$  21.4% respondents reported that at least one article/month would change their training of house staff. 36.0%  $\pm$  19.3% of all articles presented were responsible for a reported change in practice, and 38.0%  $\pm$  19.1% of all articles presented were responsible for a reported change in training of house staff. On a 0-100 Likert scale, the average overall usefulness of each session was rated as  $86.3 \pm 11.1$ , and the average likelihood to attend again was rated as  $95.9 \pm 4.3$ .

**Conclusions:** A monthly 30-minute web-based journal club can be a valuable educational tool for dermatologic surgeons. Future directions may include expanding participation and pursuing CME credit.

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## 859

### Factors that influence immediate complications in dermatologic surgery: A cohort study

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**Background:** Dermatologic surgery is a field in expansion in the last decades. Despite its importance, there are few prospective studies to assess immediate complications.

**Objective:** To describe the incidence and main risk factors for dermatologic surgery complications.

**Methods:** Cohort study of patients submitted to dermatologic surgery in a university center (Botucatu Medical School, Brazil). Subjects were evaluated in the seventh and in the fourteenth days after the procedure. Specific types of complications (infection, bleeding, dehiscence, hematoma and necrosis) were analyzed according to clinical, demographic and intervention-related aspects. Risk factors were identified by univariate analysis and the estimation of the odds ratio (OR) at a 95% confidence interval (CI). The significant values resulting from this analysis were included in a multiple regression model where OR, 95% CI, and P values confirmed the independent risk for some variables.

**Results:** We followed 313 cutaneous surgeries in 165 women and 148 men. The mean age was  $63.3 \pm 17.8$  years. Basal cell carcinoma was the main diagnosis (64.4%). Primary closure accounted by 69% of the procedures, followed by flaps 22% and grafts 6%. Overall complications were observed in 14% of the patients. Infection rates after the seventh and the fourteenth days were 7% and 3%, and were associated with comorbidities (OR 10.2;  $P = .02$ ). Total dehiscence occurred in 2% of the cases. Postoperative bleeding occurred in 22% of the patients, but only 1% was considered significant. We did not find increased bleeding complications among patients taking anticoagulants and antiplatelet drugs. Some skin necrosis occurred in 5% of the cases. Overall complications were associated to nonprimary closure (OR = 1.8) and patient comorbidities (OR = 3.1).

**Conclusion:** Dermatologic surgery is characterized by a nonnegligible rate of complications. Dermatologists should be aware of risk factors, mainly among patients with comorbidities and surgeries that require complex closure techniques.

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