Multinucleate Cell Angiohistiocytoma: From clinical presentation to diagnosis

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Abstract (300 word limit)

Literature review: Multinucleated cell angiohistiocytoma (MCAH) is a rare clinical entity whose pathogenesis is not fully understood. It is more common in middle-aged women and is characterized by erythematoviolaceous papules or nodules, usually asymptomatic and predominantly located in the extremities. Histopathology is essential for making the diagnosis, consisting of typical alterations in the dermis, namely the proliferation of small vessels and the presence of multinucleated giant cells. Evolution is benign, although persistent, with few reported cases of spontaneous remission. Case presentation: 48-year-old man, referred by a primary care physician to a Dermatology consult, who exhibited asymptomatic papules and nodules grouped on the back of both hands, with a year of evolution. He was diagnosed with MCAH after the histopathologic study, which excluded differential diagnoses that were clinically proposed. Discussion: Although there were typical clinical and histopathologic findings of MCAH, this clinical case merits interest by the rarity of this pathology, and its elusiveness. It's also important to note the good continuity of care, from primary to secondary medical setting. With this case study the author intends to contribute to the knowledge about this entity and highlight the complementarity between clinical observation and histopathologic analysis.

Image



Figure 1: Erythematoviolaceous nodule and confluent papules on dorsal surface of the left hand.

Recent Publications (minimum 5)

1. Frew JW. Multinucleate cell angiohistiocytoma: clinicopathological correlation of 142 cases with insights into etiology and pathogenesis. Am J Dermatopathol 2015; 37(3): 222–8.
2. Wang M, Abdul-Fattah B, Wang C, Zhao Y, Qu X, Al-Muriesh M, et al. Generalized multinucleate cell angiohistiocytoma: case report and literature review. J Cutan Pathol 2017; 44(2): 125–34.
3. Pérez LP, Zulaica A, Rodríguez L, Campo MC, Peñaranda JMS, Fernández-Redondo V, et al. Multinucleate cell angiohistiocytoma. Report of five cases. J Cutan Pathol 2006; 33(5): 349–52.
4. Grgurich E, Quinn K, Oram C, McClain R, Lountzis N. Multinucleate cell angiohistiocytoma: Case report and literature review. J Cutan Pathol 2019; 46(1): 59–61.
5. Teixeira V, Serra D, Pereira N, Tellechea O. Multinucleate cell angiohistiocytoma: a new case report with dermoscopy. Dermatol Online J [Internet] 2014; 20(3).
6. Rato M, Monteiro AF, Parente J, Aranha J. Case for diagnosis. Multinucleated cell angiohistiocytoma. An Bras Dermatol 2018; 93(2): 291–3.
9. Cesinaro AM, Roncati L, Maiorana A. Estrogen receptor alpha overexpression in multinucleate cell angiohistiocytoma: new insights into the pathogenesis of a reactive process. Am J Dermatopathol 2010; 32(7): 655–9.
10. Roy SF, Dong D, Myung P, McNiff JM. Multinucleate cell angiohistiocytoma: A clinicopathologic study of 62 cases and proposed diagnostic criteria. J Cutan Pathol 2019; 46(8): 563–9.

Photograph



Biography (150 word limit)

Dr Andre Melicia is a third-year primary care medical resident from Cascais, Portugal who has interest in Dermatologic pathology and developing team work with other specialists, contributing to improve scientific knowledge and clinical care. He has a work already published about Multinucleate Cell Angiohistiocytoma (2020).

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Notes/Comments: