

## QUIZ

**A surfacing problem****Howard H. Chan, Anthony K. Chan and Keith K. Lau**

Thrombosis and Atherosclerosis Research Institute, 237 Barton St. E, Hamilton, Ontario, Canada.

Corresponding author: Dr. Howard H. W. Chan      Email: [chanh@mcmaster.ca](mailto:chanh@mcmaster.ca)

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**Clinical History**

A 76-year-old man presented with macrocytic anemia (Hb 75 g/L, MCV 102  $\mu\text{M}^3$ ) and skin nodules (Figure 1) in the back. The skin nodules increased in size and number. Peripheral blood counts showed a hemoglobin level of 75 g/L, MCV of 102.0  $\mu\text{M}^3$ , neutrophil count of  $14.7 \times 10^3/\text{mm}^3$  and monocyte count of  $2.1 \times 10^3/\text{mm}^3$ . Bone marrow aspirate showed dyserythropoiesis, immature monocytes and 5% blasts without clonal cytogenetic anomalies. Skin biopsy confirmed myeloid monocystic infiltration of dermis (Figure 2).

**Quiz:**

What is your diagnosis?



Fig. 1. The appearance of the two reddish brown nodules on the back of the patient.

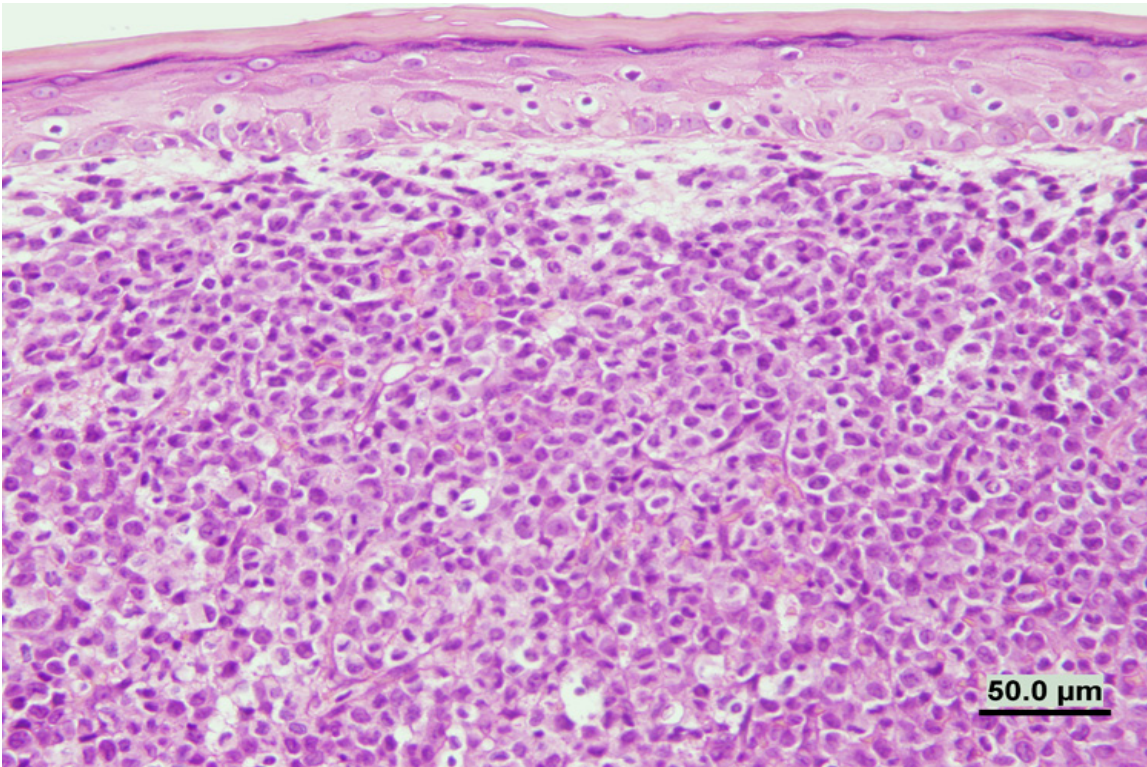


Figure 2. The skin biopsy showed normal epidermis but diffuse mono-nucleus cells infiltration of the dermis.

**Answer**

Leukemic cutis

**Comments**

Leukemic cutis has protean manifestations and may present before overt symptoms of myeloid or lymphocytic leukemia and is most commonly presents as single or multiple erythematous popular or nodular lesions on skin (1). It occurs more commonly in patients with acute myeloid leukemia than those with chronic myeloproliferative diseases (2). The presence of leukemia cutis signifies poor prognosis and the treatment should be directed towards the underlying illness. The patient succumbed to the rapid progression of disease.

**References**

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