

Eccrine squamous syringometaplasia associated with lichen sclerosus et atrophicus.

Salih Mishlab¹, Itzhak Cohen³, Reuven Bergman^{1,2}.

Departments of Dermatology¹ and Pathology² , Rambam Health Care Campus, Haifa, and Department of Pathology³ , Western Galilee Medical Center, Nahariya ,and The Ruth & Bruce Rappaport Faculty of medicine⁽¹⁻³⁾, Haifa, Israel.

Article type: Case report.

Title: Eccrine squamous syringometaplasia and lichen sclerosus et atrophicus.

Corresponding author:

Salih mishlab

HaAliya HaShniya St 8, Haifa, israel, 3109601

Email: s_mishlav@rambam.health.gov.il

Funding sources: None.

Conflicts of Interest: None declared.

Manuscript word count: 841 words

References: 11

Figures: 8

Key words:

Eccrine squamous syringometaplasia, LSA.

Abbreviations used: ESS, Eccrine squamous syringometaplasia; LSA, Lichen sclerosus et atrophicus; GVHD, Graft versus host disease; PAS, Periodic acid–Schiff (PAS) stain; CEA, Carcinoembryonic antigen; EMA, Epithelial membrane antigen; SCC, Squamous cell carcinoma; VEGF, Vacular endothelial growth factor; GLUT-1, Glucose transporter-1; ER , Estrogen receptor; PR , Progesterone receptor; HER-2 , Human epidermal growth factor receptor 2.

Abstract

Eccrine squamous syringometaplasia (ESS) has been associated with several conditions including morphea, linear scleroderma and burns, It is yet to be reported in lichen sclerosus et atrophicus (LSA). We describe a bullous LSA plaque on the forearm of a woman with preexisting genital LSA and vitiligo. Besides the histopathological findings of bullous LSA , numerous small irregular squamoid structures were present in the mid and upper dermis always above the normal eccrine glands. The histopathology , Periodic acid–Schiff (PAS) stain, and positive immunostains for P63, low molecular weight keratins 8&18, epithelial membrane antigen (EMA) and carcinoembryonic antigen (CEA) , supported the diagnosis of ESS. The pathogenesis of ESS in LSA may be related to ischemia, inflammation and fibrosis.