

An irregular dark mole on the breast

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The diagnosis of pigmented lesions is a daily challenge in general practice. Dermatoscopy can provide extra clues, but requires significant expertise. This series will help you hone your skills.

Case presentation

A 26-year-old woman had a longstanding, dark, flat, irregular pigmented lesion (1.3 x 0.9 cm) on her left breast (Figure 1). The pigmented lesion had been present since childhood and was associated with slow progressive growth. Dermatoscopy revealed mottled blue-black pigment in a retiform pattern covered by a patchy blue-grey veil (Figure 2). Skin biopsy showed an epidermis of normal thickness without junctional melanocytic nests or melanocytic proliferation. The underlying dermis had nests of uniform melanocytes (naevus cells) with sclerosis of collagen. There were pigmented nests of naevus cells in the superficial and mid dermis, but the deeper naevus cells were devoid of pigment (Figure 3).

Diagnosis

The final diagnosis was a deeply penetrating dermal naevus (probably congenital) with superficial pigmented nests.

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Figure 1. Irregular, deeply pigmented lesion on the patient's left breast.

Discussion

This was a most unusual benign naevus because it was asymmetrical and greater than 5 mm in diameter with a mottled dark colour, and had a history of progressive growth. The blue-black colour was due to the superficial dermal collections of deeply pigmented naevus cells, which were seen on dermatoscopy to be distributed as a dermal network. The blue-grey veil was produced by the superimposed normal epidermis and strip of dermis acting as a filter over the pigmented nests. The main differential diagnosis was that of a blue naevus, but these are often sharply demarcated and have deeply pigmented spindle melanocytes extending through the dermis.

Keypoint

Congenital dermal naevi may be associated with unusual blue-black retiform patterns with a blue-grey veil under dermatoscopy. These patterns are due to nests of benign, superficial, pigmented naevus cells. MT

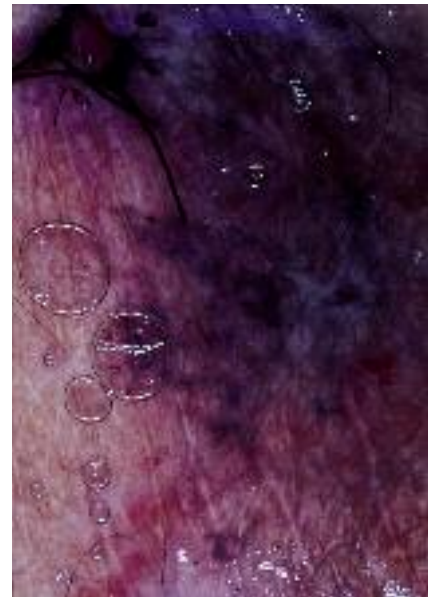


Figure 2. Dermatoscopy revealing a blue-black retiform pigment pattern with a patchy blue-grey veil.

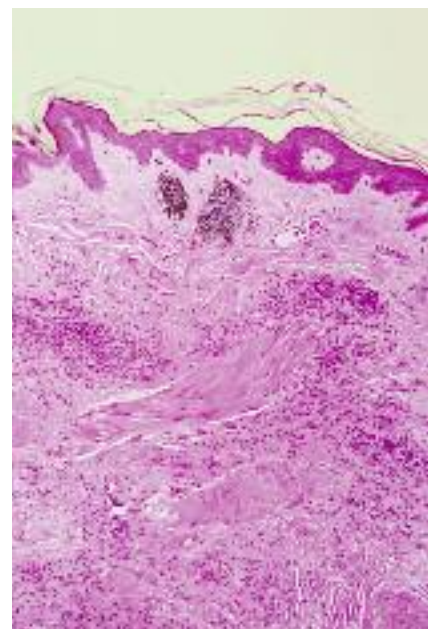


Figure 3. Skin biopsy demonstrating sheets of melanocytes (naevus cells) extending through the dermis with sclerosis. Melanin pigment is concentrated in the superficial melanocyte nests in the dermis and spares the epidermis.