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## IMAGES IN DERMATOLOGY

### Cutaneous Metastases From Adenocarcinoma of the Prostate<sup>☆</sup>

### Metástasis cutáneas de adenocarcinoma de próstata

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An 87-year-old man had been diagnosed with acinar adenocarcinoma of the prostate (Gleason score 9) following transurethral resection of the prostate 5 years earlier. He was started on combined hormonal therapy (goserelin and bicalutamide). Two years later, he showed clinical progression (prostate-specific antigen, 3.83–45 ng/mL) and a lack of response to abiraterone. Bladder involvement was detected and the patient underwent multiple operations to relieve the obstructions in addition to adjuvant radiotherapy. The

patient consulted for asymptomatic cutaneous lesions that had appeared in the previous 2 weeks. Physical examination showed clusters of indurated pink papules with a smooth surface that formed a mass around the base of the penis (Fig. 1A). One of the lesions was ulcerated and necrotic (Fig. 1B) and there were several smaller lesions on an erythematous-edematous plaque on the pubis. Biopsy was consistent with cutaneous metastasis from adenocarcinoma of the prostate. The bilateral inguinal lymph nodes were

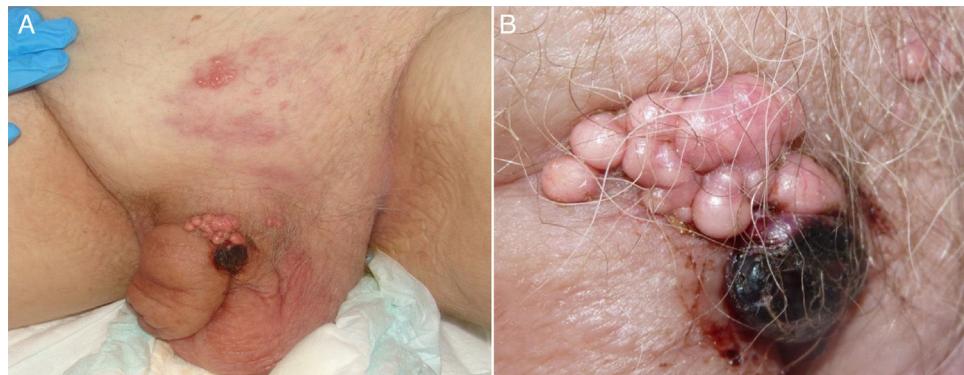


Figure 1

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enlarged on palpation, and the computed tomography scan showed retroperitoneal, visceral, and bone involvement. The patient died 3 weeks later. Prostate cancer is the third most common cancer in men. Cutaneous metastases are rare in this setting, with an incidence of less than 1%, but they can be the first sign of extranodal disease. Prognosis is poor (mean survival of 7 months) and treatment is purely palliative.