

IMÁGENES EN DERMATOLOGÍA

[Translated article] Fatal outcome in classic Kaposi's sarcoma

Sarcoma de Kaposi con desenlace fatal

M. Mansilla-Polo^{a,b,*}, R. Botella-Estrada^{a,b,c}

^a Servicio de Dermatología, Hospital Universitario y Politécnico La Fe, Valencia, Spain

^b Instituto de Investigación Sanitaria (IIS) La Fe. Valencia, Spain

^c Facultad de Medicina, Universitat de València, Valencia, Spain

A 66-year-old male with no significant past medical history was referred from an external center for the evaluation of radiation therapy-resistant refractory classic Kaposi's sarcoma.

Upon examination, a vascular-looking tumor was observed on the left foot, occupying almost its entire extent (Figure 1A and B).

After confirming the diagnosis with a new biopsy (figure 1C), which showed vascular proliferation with the promontory sign, and ruling out other possible differential diagnoses such as bacillary angiomatosis and various infectious processes, cutaneous lymphoma, and other vascular neoplasms, treatment was initiated with doxorubicin. The patient remained stable for 3 years until disease progression, which became refractory to the addition of pazopanib. The patient rapidly developed new lesions that distributed uniformly across the rest of his body. A new biopsy ruled out tumor anaplastic transformation, and due to the extent of the disease and the patient's poor overall condition, a multidisciplinary decision involving Oncology, Traumatology, and Plastic Surgery led to the decision to dismiss amputation and prioritize palliative measures until the patient's death.

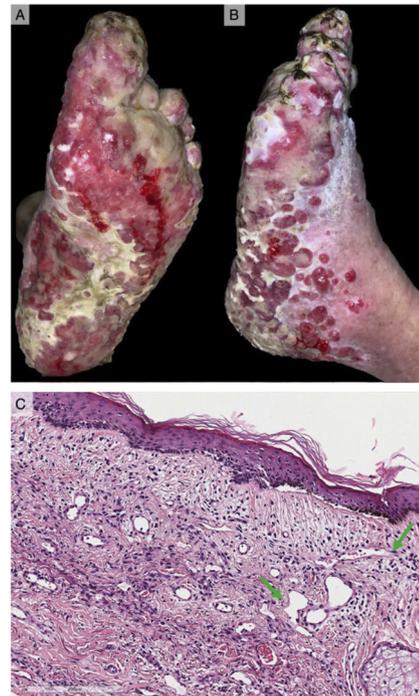


Figure 1

This case report serves as an example of Kaposi's sarcoma with a long and refractory treatment course, and unsuccessful outcomes. It underscores that while its course is often much more progressive and benign, in cases like the one presented here, prognosis can be fatal.

DOI of original article:

<https://doi.org/10.1016/j.ad.2023.03.013>

* Corresponding author.

E-mail address: miguel.yecla96@hotmail.com

(M. Mansilla-Polo).

<https://doi.org/10.1016/j.ad.2024.03.015>

0001-7310/© 2023 AEDV. Published by Elsevier España, S.L.U. This is an open access article under the CC BY-NC-ND license (<http://creativecommons.org/licenses/by-nc-nd/4.0/>).

