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Cutaneous metastases as a first manifestation of a metastatic lung carcinoma

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We report a case of an 83-year-old male, who presented to our departments with 3 red, painless nodes on the left shoulder, on the right flank and on the right abdominal area. He complained also for anorexia, progressive weight loss and difficulties in swallowing over one month, so that he was admitted to our hospital. Excision of the node on the right flank was performed and showed a non-small-cell formation in dermis and subcutaneous tissue with epithelioid cell clusters, atypia and prominent nucleoli. There was no clear squamous cell or adenoid differentiation. The Ki-67 labeling was 40%. The outer skin showed a normal epidermis. Immunohistochemically, the tumor cells were positive for CK5, CK6, p63 and vimentin. S100, Melan-A and CK20 were negative. The malignant tumor was located remote from the epidermis and skin appendages, so we suspected a metastatic nature. A diagnosis of a dedifferentiated, partly sarcomatoid squamous cell carcinoma, probably originating from the lung was made. Indeed, a computed tomography (CT) of chest, abdomen and pelvis showed except for a known preexisting pulmonary fibrosis, a tumor in the left lung with infiltration of the diaphragm. Moreover, several intrapulmonary lesions, peritoneal and mesenterial metastasis, several soft tissue metastases, a suspected cardial metastasis as well as a suspicious lymph node at the left lower mediastinum were detected. A lung biopsy was planned but the patient died due to a respiratory insufficiency. The present report underlines that sarcomatoid type of lung carcinoma, a rare and highly aggressive tumor should be considered in cutaneous metastatic lesions.

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Phenotypical analysis of ectoenzymes CD39 and CD73 in peripheral blood $CD4^+CD25^{high}Foxp3^+$ regulatory T cells in psoriasis

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It is currently unclear whether human ectoenzymes (CD39/CD73) involved in the impaired suppressive activity of $CD25^{high}$ $Foxp3^+$ regulatory T cells (Tregs) in psoriasis. This stidu aimed to evaluate the frequency and phenotypes of CD39/CD73-expressing Tregs and related receptor adenosine receptor 2A (A2AR) in peripheral blood of patients with different types of psoriasis. Peripheral blood mononuclear cells (PMBCs) were prepared from patients with three different types of psoriasis (psoriasis vulgaris, pustular psoriasis and erythrodermic psoriasis) and the frequency and phenotypes of CD39 and CD73 expressing Tregs, A2AR expressing Teff were all determined by flow cytometry analysis. Blood from healthy volunteers served as controls. At approximately 50% less than that of normal controls, the expression of single $CD73^+$Tregs was markedly reduced in psoriasis vulgaris patients. Additionally, the levels of $CD39^+$Tregs and $A2AR^+$Teff in pustular psoriasis were significantly lower than in normal controls. Among three different types of psoriasis, CD39 expression was strikingly reduced in the blood Treg population of pustular psoriasis patients. Decreased CD73+Tregs level were observed in psoriasis vulgaris compared to pustular psoriasis and erythrodermic psoriasis patients. The differences in the expression of CD39- and CD73-Tregs may be a factor in the pathogenesis of psoriasis.

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