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Infundibulocystic Basal Cell Carcinoma: A rare histopathological entity

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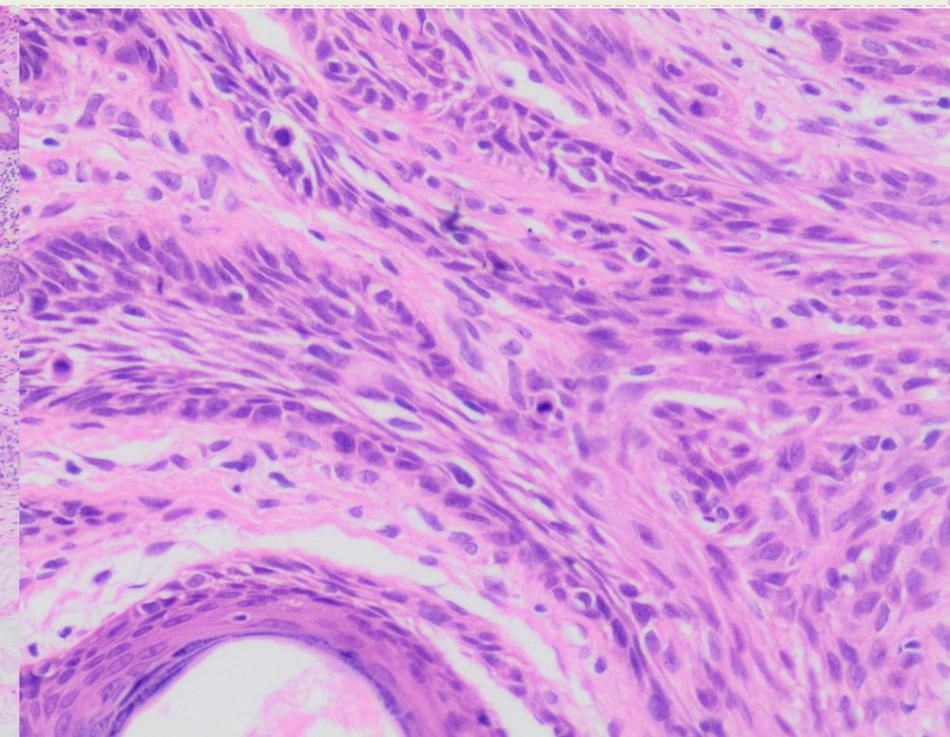
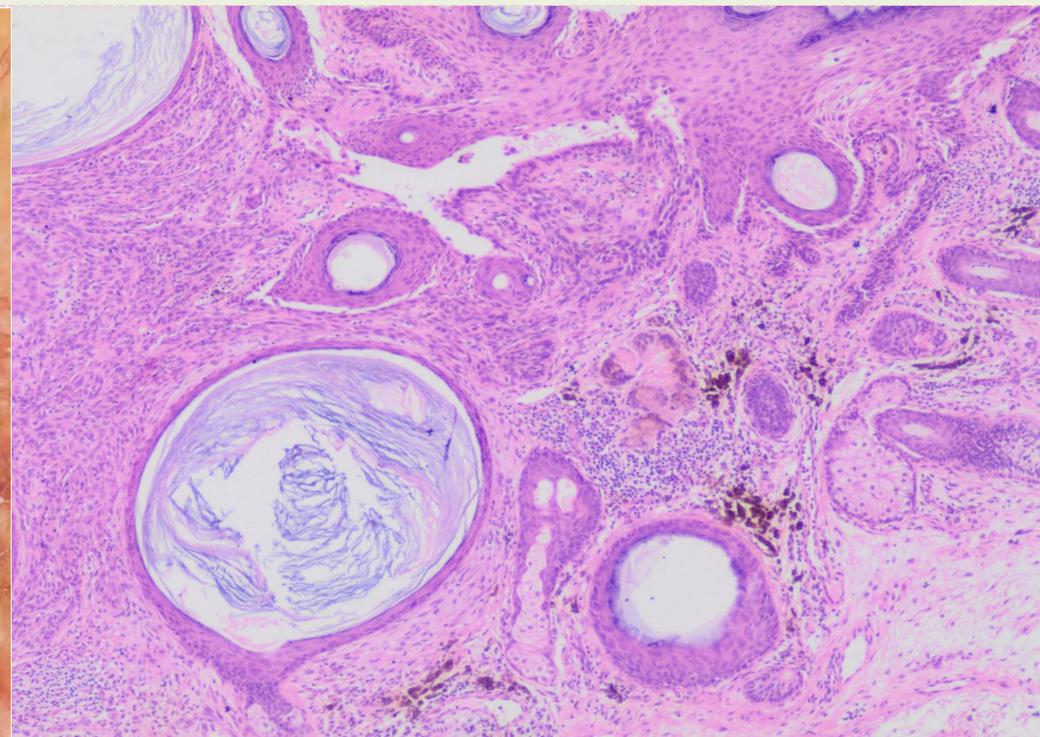
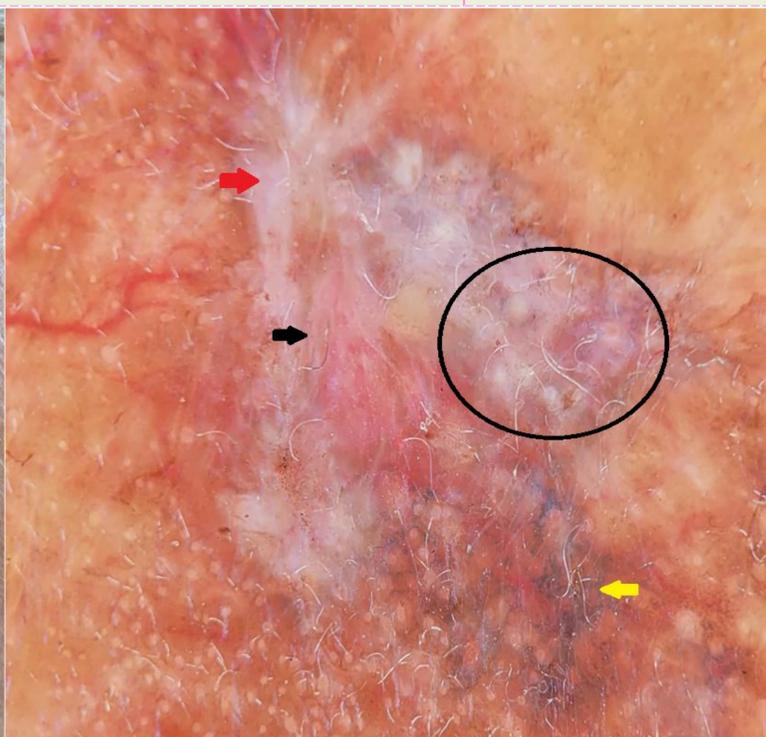
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Introduction

- Infundibulocystic Basal cell carcinoma (BCC) is a rare subtype of BCC
- Often presents as dome-shaped pearly papule or nodule over face.¹
- Less aggressive course compared to other subtypes.¹
- Needs to be differentiated from benign diseases.

Patient details

- 55 y/o woman presented with flat asymptomatic hyperpigmented plaque on the left malar region for 3 years.
- Polarized dermoscopy: light brown background, white structureless areas (red arrow), chrysalis-like structures (black arrow), keratotic plugs (black circle), pigment network (yellow arrow), and peripheral arborising vessels.
- Differential diagnoses: Discoid lupus erythematosus, benign lichenoid keratosis, and morpheaform BCC.
- Baseline biopsy: suspicious of BCC
- Mohs micrographic surgery was performed.



Histopathology

- Basaloid cells arranged in trabecular patterns with central keratocysts lined by squamous epithelium.
- Cells had high nuclear-cytoplasmic ratio and moderate atypia.
- Stroma showed fibroplasia with pigment incontinence.
- A final diagnosis of infundibulocystic BCC was made.

Conclusion

- Classical BCC dermoscopic features like ulceration, maple leaf-like areas, blue-gray nests, globules, blue-white veil or spoke wheel structures were absent
- Necessitates careful clinicopathological correlation.

References

1. Behera B, Kumari R, Mohan Thappa D, Gochhait D, Ayyanar P. Pigmented infundibulocystic basal cell carcinoma: A diagnostic challenge in dark skin. *Australas J Dermatol.* 2021 May;62(2):e349-e351.

There is no conflict of interest