

Diffuse Hyperkeratotic Skin Lesion as Paraneoplastic Manifestation of Classical Hodgkin's Lymphoma

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Abstract

A 28-year-old male presented with a two-month history of fever and generalized lymphadenopathy. Notably, he had a six-month history of pruritic, scaly, hyperkeratotic, non-erythematous skin lesions spread diffusely over his trunk and the back of his head, covering 41.5% of his body surface area.

Keywords: lymphadenopathy; hyperkeratotic; manifestation; non-erythematous; fever

Introduction

A 28-year-old male presented with a two-month history of fever and generalized lymphadenopathy. Notably, he had a six-month history of pruritic, scaly, hyperkeratotic, non-erythematous skin lesions spread diffusely over his trunk and the back of his head, covering 41.5% of his body surface area (Figures 1 and 2). The patient reported transient improvement when started on steroids by a dermatologist, but the lesions recurred after two months of treatment and have persisted since.

Lymph node biopsy and immunohistochemistry confirmed a diagnosis of Classical Hodgkin lymphoma (nodular sclerosis type), stage 3B (as

indicated by PET-CT). The patient commenced ABVD (Adriamycin, bleomycin, vinblastine, dacarbazine) chemotherapy.

Skin involvement in Hodgkin's lymphoma typically presents as non-specific lesions, such as generalized pruritus, hyperpigmentation, eczema, or acquired ichthyosis. These lesions are often paraneoplastic and are usually observed just prior to or at the time of the diagnosis of advanced Hodgkin lymphoma associated with systemic nodal disease [1,2].

While paraneoplastic syndromes are relatively common in lymphoma patients, such extensive skin involvement across the trunk and head is a noteworthy occurrence [3].



Figure 1: Skin lesions diffusely spread over whole trunk.



Figure 2: Skin lesions diffusely spread over back of head.

References

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