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Scalp metastasis from lung cancer

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Skin metastasis to the scalp is very rare. This report describes metastasis to the scalp as the first manifestation of an unsuspected occult neoplasm.

An 80-year-old woman presented with a four-week history of a slowly growing, non-ulcerated round solitary nodule in the scalp of the right temporal. The lesion was 2 cm in diameter, painless, and movable. Skin biopsy revealed metastasis from the lung adenocarcinoma. The chest film on admission revealed a large mass in the left upper lobe. CT scans showed extensive metastases to brain, liver, bone and both adrenal glands.

Because of decreasing performance status of the patient, she received 250 mg gefitinib once daily. Although the response was evaluated as no change, she had symptomatic relief. The patient died of her disease 11 months later the diagnosis of skin metastasis.

Skin metastasis occurs primarily near the primary lesion of internal cancers (1). To our knowledge, skin metastasis was reported in some previous reports (1,2); however, scalp metastasis from lung adenocarcinoma has never been reported in the English literature. Skin metastasis lacks a uniform or distinctive gross appearance (3), being painless, movable, and round solitary or multiple nodules. According to the report by Thiers (4), most skin metastases from lung cancer are firm and white but skin discoloration, inflammation, or even ulceration can occur. Our patient complained of non-ulcerated lesion in the scalp of the right temporal. The lesion of our patient was first considered as a primary skin disease because of its unusual localization as metastasis. But excisional biopsy revealed metastasis from the lung adenocarcinoma.

Our patient had extensive metastasis when the skin lesion was

found. This distant spread implies that cancer cells may reach many sites of the whole body via the bloodstream and the lymphatic system. Like all other metastatic lesions, skin metastasis reflects the progression of the primary malignancy. Most of the patients with skin metastasis of lung cancer die within a few months (2,5). However, we believe that palliative care is important for the patients to provide comfort for symptoms related to the skin metastasis. Physicians are likely to recognize a new skin lesion, and skin biopsy should be performed from the lesions located even at uncommon sites.

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