

# Bowen병에서 유래된 다발성 편평상피세포암의 방사선 치료후의 구제수술 1예

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## A Case of Salvage Operation in Radiation-Failed Squamous Cell Carcinoma Transformed from Bowen's Disease

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### ABSTRACT

Bowen's disease was first described by Bowen in 1912 as a precancerous dermatosis. It is believed that its main causes are exposure to UV and a history of arsenic ingestion. Bowen's disease are precursor lesions, 5 percent of which is believed to develop into squamous cell carcinoma. It is stated in the literature that those patients in whom invasive cell carcinoma develops, 13 per cent of the lesions metastasize and death eventually occurs in 10 per cent of them. Therefore, elective lymphadenectomy is rarely indicated and is usually reserved for recurrent, histologically aggressive, deeply invasive and large (greater than 2 cm) tumors. Deeply invasive tumors of the preauricular and mandibular area frequently require parotidectomy to provide an adequate deep margin, to remove the primary echelon lymph nodes and to protect the facial nerve. We report a case of salvage operation on squamous cell carcinoma that had transformed from Bowen's disease. (Korean J Otolaryngol 2004;47:478-82)

KEY WORDS : Bowen's disease · Squamous cell carcinoma.

Kim<sup>3)</sup>  
 Bowen

가 1979

Bowen (Bowen's disease)  
 (full-thickness dysplasia)  
 3~5%

15% 가<sup>1)</sup>  
 60 10~20%

10~

74 2001 2

<sup>1)</sup> 1912 Bowen 가

1964 Koh<sup>2)</sup>, Bowen Bowen

가

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6600 cGy, 5500 cGy



**Fig. 1.** Squamous cell carcinoma on cheek area was remained after radiotherapy (A) but squamous cell carcinoma on right forearm was subsided after radiotherapy (B).

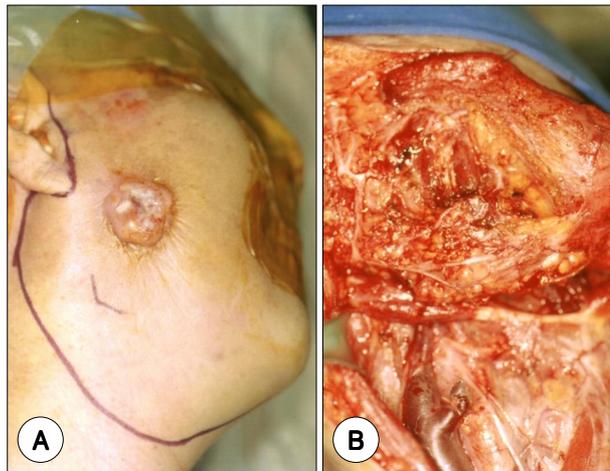


**Fig. 2.** Preoperative axial CT scan shows right skin and soft tissue mass. It is separated from the masseter muscle.

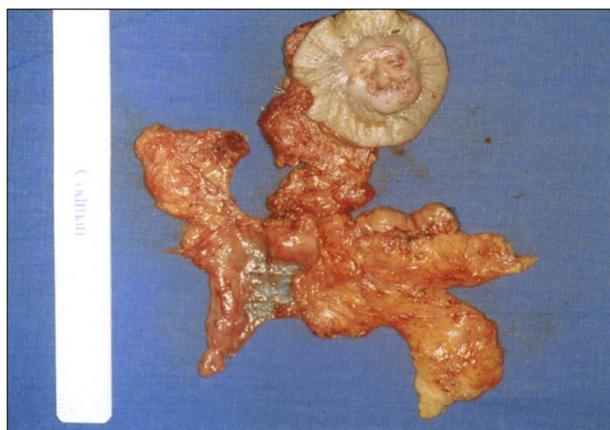
3.0 × 2.5 cm  
(Fig. 1).

(Fig. 2).

Blair (modified Blair incision) 가



**Fig. 3.** A : Modified Blair incision with anterior extension of neck incision for supraomohyoid neck dissection. B : Supraomohyoid neck dissection was done and near total parotidectomy with sacrifice of buccal branch was performed.



**Fig. 4.** Surgical specimen ; Pathologically it shows invasive squamous cell carcinoma, poorly differentiated with extension to the subcutaneous fat tissue and focally skeletal muscle and negative neck node.

(Fig. 3A).

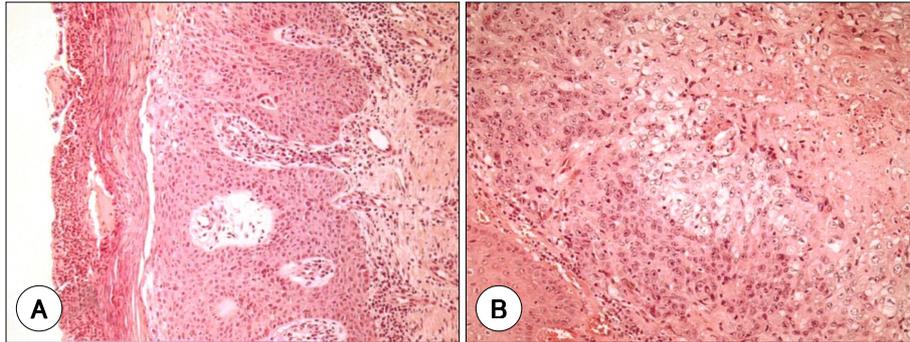
Blair  
1.5 cm  
가

(Fig. 3B). 가

(Fig. 4) 2001 2  
(severe dysplasia)가

(Fig. 5).

(Fig. 6A).



**Fig. 5.** A : Histologic findings (2001. 2) show dysplastic cells in all skin layers (Bowen's disease). B : Bowen's disease transformed invasive squamous cell carcinoma (2002. 6). Histologic findings shows loss of basement membrane and tumor cell infiltrated to basement membrane.



**Fig. 6.** A : Surgical defect in buccal area was reconstructed with radial forearm free flap. B : Postoperative facial nerve function is preserved except buccal branch (due to sacrifice of buccal branch during operation).

1) Bowen  
 가  
 가  
 가  
 1)4) Nordquist  
 5) Eliezri Bowen  
 53% HPV DNA 6)  
 가  
 Bowen  
 가  
 가  
 Bowen 7)  
 2.6~11%  
 8-11) Ramzi Bowen  
 p53 PCNA  
 (desmosome) 가

13  
 (Fig. 6B).

Bowen  
 (full - thickness dysplasia)

가 mm cm 1)4)

1)3)4) 가

1)3)



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