

MALIGNANT SKIN TUMORS IN CHILDREN: ETIOLOGY, TREATMENT, AND PROGNOSIS

A. Varan¹, M. Buyukpamukcu¹, A. Gokoz², C. Akyuz¹, M.T. Kutluk¹, B. Yalcin¹
¹*Department of Pediatric Oncology, Hacettepe University, Institute of Oncology*
²*Department of Pathology, Hacettepe University, Faculty of Medicine, Ankara, Turkey*
hupog@tr.net

Objective: To evaluate the etiology, treatment and prognosis of the malignant skin tumors in children. **Patients and Methods:** Twenty two patients who had been diagnosed with malignant skin tumors between 1972 and 2003 were retrospectively analyzed. Age range was 0.5-20 years (median: 9.5), male/female ratio was 13/9. We had 10 (45.5%) patients with malignant melanoma, five (22.7%) with primary skin non-Hodgkin lymphoma (NHL), three (13.6%) with Kaposi sarcoma (KS), two (9.1%) with basal cell carcinoma (BCC), and two (9.1%) with squamous cell carcinoma (SCC). **Results:** We could define the etiologic factors in 9 (40.9%) patients. Two KS cases were associated with renal transplantation, two cases of malignant melanoma occurred within the area of Giant hairy cell nevus, one melanoma patient previously had bone marrow transplantation due to Gricelli syndrome, one patient with BCC had Xeroderma pigmentosum and the other BCC had got radiotherapy due to previous diagnosis of medulloblastoma (disease occurred in the radiotherapy area). One SCC patient also had Xeroderma pigmentosum and the other had previous skin burn. Event-free survival rate was 61.2%. Four patients died with disease progression. Melanoma patients were treated successfully with high dose interferon in the last decade. **Conclusions:** Although malignant skin tumors are rare in childhood period, the prognosis is relatively better than adults. Malignant melanoma was the most frequent tumor. Forty percent of our patients had an underlying defect in their immune barriers which is thought to be responsible for the development of their malignancies.

