MelanA/MART and S-100 proteins. A diagnosis of spindle cell melanoma was made. Proton-emission tomography (PET) revealed abnormal radiotracer accumulation in the lesional area. A few subcentimetric lung nodules were noted on computerized tomography (CT), but these did not show radiotracer uptake on whole-body PET scan. A left hemimaxillectomy was performed with resection of 3 sentinel nodes which were negative for melanoma. Adjuvant radiotherapy was given because of close margins. Five months after surgery, the patient presented with a large submandibular mass. CT and PET scans suggested metastatic disease with an standardized uptake value of 12.2. Suspicious lymph nodes also were noted in the contralateral neck. The small pulmonary nodules seen on initial work-up had not changed on both CT and PET scans. A bilateral modified radical neck dissection was performed and interferon was given. Seven months later, chest radiographs revealed multiple bilateral pulmonary nodules, suggestive of metastatic disease. CT and PET scans confirmed pulmonary metastasis and enlargement of the nodules. There were no signs of local recurrence. The patient is presently under palliative care. This case emphasizes the poor prognosis of oral melanoma and the importance of early diagnosis.

LYMPHATIC VESSEL DENSITY IN EARLY-STAGE ORAL SQUAMOUS CELL CARCINOMAS. S. Faustino, D. Oliveira, S. Nonogaki, G. Landman, A. Carvalho, L. Kowalski, Bauru School of Dentistry, Bauru, Adolfo Lutz Institute, São Paulo, AC Camargo Cancer Hospital, São Paulo, Barretos Cancer Hospital, Barretos, Brazil.

The aim of this study was to evaluate lymphatic vessel density (LVD) in correlation with vascular endothelial growth factor (VEGF) C expression by tumors cells and with clinical and pathologic variables in patients with oral squamous cell carcinomas (OSCC). Eighty-seven patients with primary OSCC arising on the tongue or floor of the mouth, clinically T1N0M0 or T2N0M0, with occult lymph-node metastases (pN+) and without (pN0), treated in the A. C. Camargo Cancer Hospital, São Paulo, Brazil, from 1968 to 2001, were analyzed. Archived paraffin-embedded tumor specimens were sectioned and stained with antihuman podoplanin and VEGF-C antibodies (streptavidin-biotin-peroxidase technique). Lymphatic vessels were counted in intratumoral and peritumoral areas (hot spot) in 5 high-power fields (×400) from each tumor. Average values were obtained and used as cutoff point. The correlations between LVD and VEGF-C expression and clinicopathologic parameters were obtained by chi-square test. The 5- and 10-year survival rates were calculated by the Kaplan-Meier method and compared by log-rank test. No statistically significant difference was found between VEGF-C expression in OSCC regarding clinicopathologic parameters. A correlation between the intratumoral LVD and regional recurrence was found (P = .047), and occult neck metastasis was a significant prognostic factor for overall survival (P = .030). These findings indicate that high intratumoral LVD may influence the regional recurrence in neck lymph nodes of patients with early OSCC; however, this information was not enough to influence the disease-free survival rates of these patients. These findings also reinforce that occult lymph-node metastases (pN+) is the most important prognostic factor for the overall survival of the same patients. (São Paulo Foundation for Research Support [FAPESP] grant no. 2007/04907-0)


A 24-year-old man presented for removal of a unique soft nodule at the left border of the tongue. The nodule had been present since he was a teenager. His family history revealed no similar findings. Ophthalmologic and thyroid exams were normal. Introral examination revealed a unique sharply demarcated, coalescent, pink, pedunculated, and superficially ulcerated nodule, measuring 1.0 × 1.0 cm, on the dorsal surface extending along the left border of the tongue. An excisional biopsy was performed under local anesthesia, and the surgical specimen was submitted to the Bauru School of Dentistry Oral Pathology Biopsy Service, University of São Paulo. Histopathologic examination showed irregular haphazardly arranged proliferation of Schwann cells and regenerating nerve fascicles of various sizes and shapes embedded in a fibrous stroma. Superficially, we observed oral mucosa recovered by discontinuous stratified para-keratinized epithelium and an ulcer re-covered by pseudomembrane. Immunohistochemical stains for S-100 protein, epithelial membrane antigen (EMA) CD57, and collagen IV were accomplished with a standard streptavidin-biotin-peroxidase method on deparaffinized tissue sections. Immunoreactivity was graded with a semiquantitative method, and the number of positively stained cells was evaluated in 5 high-power (×400) fields. The immunostaining revealed diffuse and intense expression of S-100 by spindle cells of the nerve fascicles, intense positivity to EMA by perineurium, moderate expression of CD57 (Leu-7) by Schwann cells, and an intense collagen IV expression by endothelial cells of the blood vessels, but no expression of collagen IV was detected in the lesion. After immunohistochemical analysis the final diagnosis was traumatic neuroma of the oral cavity. (São Paulo Foundation for Research Support [FAPESP] grant no. 2007/04907-0)

ZOONOTIC ANATRICHISOMIASIS IN HUMAN ORAL CAVITY: FIRST REPORTED CASE. N. Handoo, M. Finkelstein, B. Mathison, H. Bishop, M. Eberhard, J. Hellstein. U Iowa, Iowa City, Centers for Disease Control, Atlanta, Ga.

This case presents a 44-year-old male patient from Iowa with zoonotic anatrichisomiasis. An immigrant from Mexico, he originally presented with a history of multiple oral and lip ulcers which occasionally resulted in enlarged lower lip. These symptoms progressed to crust formation on the ulcers and subsequently complete resolution within 48-72 hours. Also noted were 2 submucosal nodules on the dorsal surface of the tongue. An incisional biopsy was carried out to assist with diagnosis. Histopathologic examination revealed the presence of a coiled nematode with esophagus embedded in a prominent stichosome in the anterior end, paired bacillary bands, and small size. These characteristics were consistent with trichuroid features that aided in the identification. This diagnosis was confirmed by the Division of Parasitic Diseases at the Centers for Disease Control. Only a handful of human cases of infection with anatrichisomes have been reported in literature. Four of the earlier cases occurred as skin lesions, whereas the most recent one, reported in 2005, was an incidental finding in a breast biopsy. The causative parasite for the present case has been suggested, but not confirmed, to be Anatrichisoma buccalis of the opossum. This is an unusual case, because it is the first report involving the oral cavity in humans.