Title: From Suspected Syphilis to Erythroplasia of Queyrat: Role of Biopsy and Carbon dioxide Laser in the Management

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Complete

resolution of

lesion after

CO<sub>2</sub> laser

ablation

### Introduction

- Penile ulcers have varied etiologies, commonly infectious but occasionally malignant.
- Persistent ulcers despite adequate therapy necessitate histopathological evaluation.

## **Case History**

- A 58 years old married male known diabetic and hypertensive referred in view of positive VDRL test with titres of 1:16 to dermatology OPD.
- ❖Patient denied history of high risk sexual behaviour and spouse's VDRL was negative.
- ❖During examination a single painless ulcer was seen just above the coronal sulcus on prepuce with Candidial balanoposthitis .
- ❖Patient was diagnosed as primary syphilis with Candidial balanoposthitis.
- ❖Patient was treated with 2 doses of Injection Benzathine penicillin and fluconazole 150 mg stat dose.
- ❖ Patient developed a fixed drug reaction after the second dose of benzathine penicillin, hence the third dose was not given. Oral azithromycin was given in multiple courses.
- ❖Afte 3 months of treatment VDRL was non-reactive but ulcer was persistent and gradually increasing
- Histopathology confirmed the diagnosis of Erythroplasia of Queyrat
- ❖ The ulcer was ablated with carbon dioxide laser under local anaesthesia with complete healing of lesion without recurrence at 18 months follow up.

## **Cutaneous Examination**

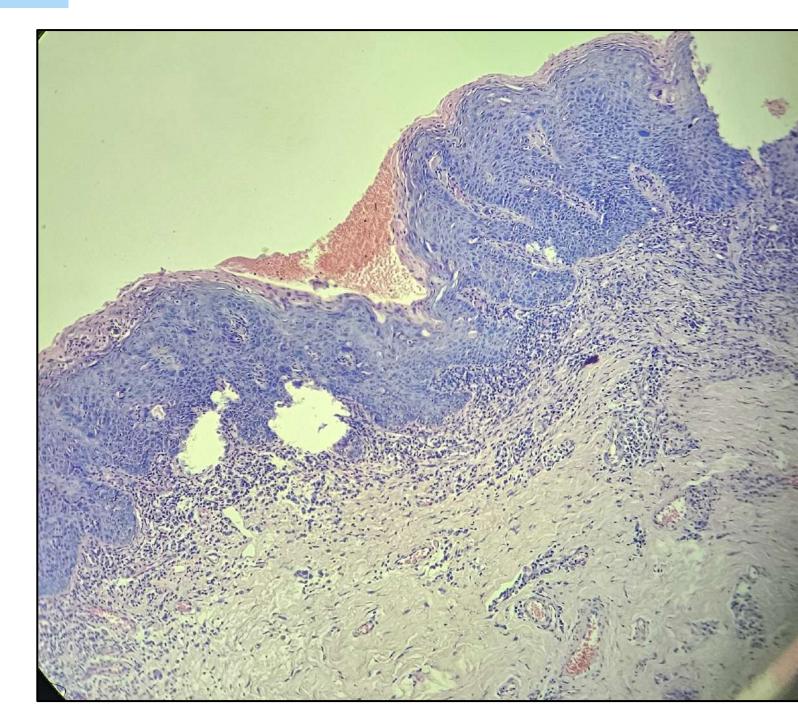


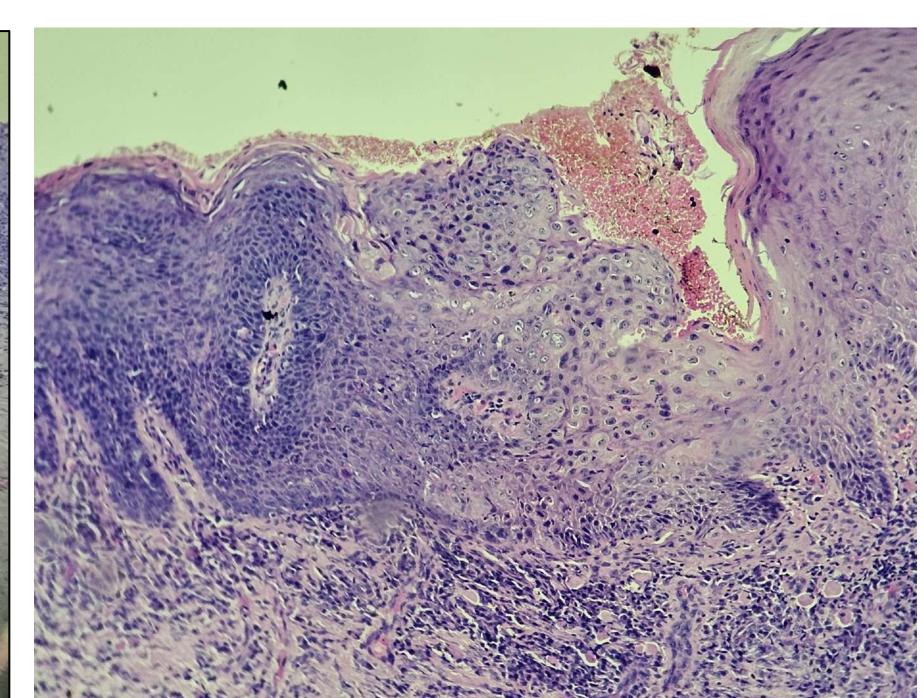
Maceration and white membrane on the prepuce with single indurated ulcer



Resolution of balanoposthitis After treatment but persistence of ulcer after 2 doses of Benzathine penicillin

# Histopathology





Full thickness dysplasia of epidermis with atypical keratinocytes .Dermis- moderately dense superficial and mid perivascular infiltrate of lymphocytes and numerous plasma cells

## Conclusions

- Erythroplasia of Queyrat (EOQ) is a squamous cell carcinoma in situ most commonly located on the glans penis or prepuce.
- Accounts for roughly 10 % of all penile malignancies and may lead to invasive squamous cell carcinoma.
- Standard therapy: local excision, partial or total penectomy, cryotherapy, and topical cytotoxic agents.
- CO2 laser proved to be an effective therapeutic modality
- Our case also highlights the monitoring of treatment response and role of biopsy to look for presence of coexisting diseases in patients of syphilis

### **Treatment**



After 3 weeks



After 6 months

### References

Greenbaum SS, Glogau R, Stegman SJ, Tromovitch TA. Carbon dioxide laser treatment of erythroplasia of Queyrat. J Dermatol Surg Oncol. 1989 Jul;15(7):747-50. doi: 10.1111/j.1524-4725.1989.tb03623.x. PMID: 2501369.

# Conflict of interest- none