

경부 림프절 전이를 동반한 혀부의 Merkel Cell Carcinoma 1예

이 환 호

A Case of Merkel Cell Carcinoma with Cervical Lymph Node Metastasis

Hwan Ho Lee, MD

Department of Otolaryngology, Kosin University College of Medicine, Busan, Korea

—ABSTRACT—

Merkel cell carcinoma (MCC) is rare primary neuroendocrine skin tumor that usually arises in the head and neck or extremities of elderly patients. MCC has a high incidence of locoregional recurrence with distant metastasis. The treatment of choice is wide local excision of the primary lesion and regional lymph nodes followed by irradiation. I experienced a case of MCC in the cheek area with submandibular lymph node metastasis. The patient died of metastatic disease 13 months after operation. I report this case with review of literatures. (J Clinical Otolaryngol 2005;16:323-326)

KEY WORDS : Merkel cell carcinoma · Cheek · Lymphatic metastasis.

서 론	13	
Merkel cell carcinoma 1-3)	26	증 례
가 3)	5	가 1
30~64% 4)	34	2 × 3 cm
Merkel cell carcinoma 1		3 × 3 cm
: 2005 9 3		(Fig. 1).
: 2005 10 4		X-
: , 602 - 702		(CT)
: (051) 990 - 6470 · : (051) 245 - 8539		(Fig. 2).
E - mail : hornet@mdhouse.com		

(MRI) T2WI
가
T1W1

(Fig. 3).

Gallium scan
Gallium 가 (Fig. 4).

neuroendocrine tumor

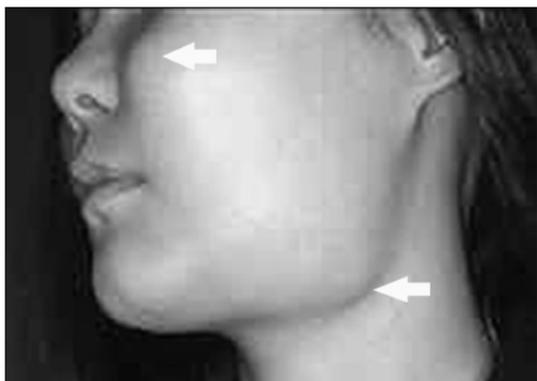


Fig. 1. Preoperative figure of the patient. A buccal mass protruding to left nasal vestibule, and a metastatic mass adjacent to left submandibular gland (arrow).

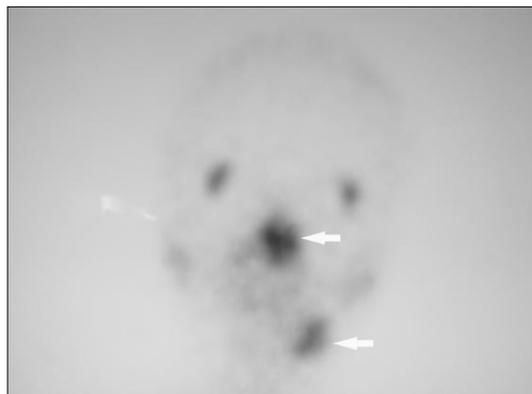


Fig. 4. Preoperative Gallium scan. Focal gallium uptake at left buccal area and left submandibular area indicating lymph node (arrow).

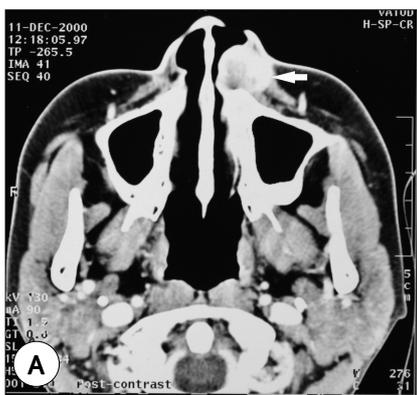


Fig. 2. Preoperative contrast enhanced axial CT scan. A : Axial section shows a highly enhanced soft tissue mass (arrow) at left cheek protruding into left nasal vestibule. No evidence of bony erosion or destruction was observed. B : A 1.5 cm sized mass-like lesion with (arrow) homogeneous enhancement, adjacent to left submandibular gland.



Fig. 3. Preoperative MRI. A : Axial T2WI shows a high signal mass (arrow), identified at the CT scan of Fig. 2A, well-demarcated from surrounding soft tissues. B : Enhanced-T1WI shows a high signal mass (arrow) identified at Fig. 2B.

Merkel cell carcinoma 1
 2 × 3 cm 가
 (Fig. 6).
 가
 (nucleoli)
 Merkel cell carcinoma
 (Fig. 5).
 Neuron specific
 enolase, Cytokeratin antigen, Chromogranin
 , S - 100 protein, Leukocyte common
 antigen
 가
 3 5240
 cGy , 3
 Gallium scan,
 8 cyclophosphamide, metho-
 trexate, adriamycin 8
 12

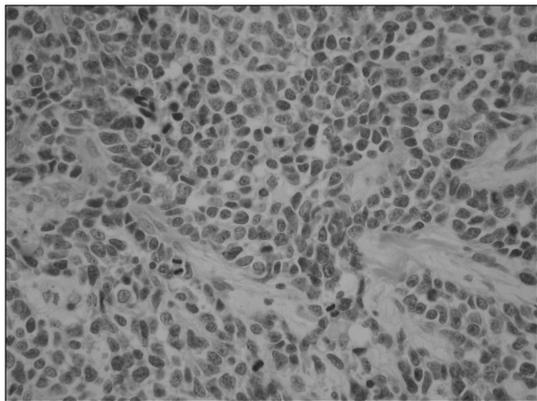


Fig. 5. Pathologic finding. H & E stained section in histology from the Merkel cell tumor of the buccal area shows that small cells, hyperchromatic chromatin without distinct nucleoli and occasional mitosis. (× 400).



Fig. 6. Operative finding. Excision was performed through lateral rhinotomy with lip-splitting incision.

고 찰

Merkel cell carcinoma(MCC) Neuroendocrine
¹⁾³⁾ 1972 Toker²⁾
 Merkel
 MCC ,
 가 .⁵⁾ MCC 65
⁶⁾⁷⁾
 가 가
 가
 . MCC
 , ,
 Leukocyte
 common antigen , Neuron specific enolase,
 Cytokeratin antigen ,
 Neuron specific enolase, Cytokeratin
 antigen
 가 S -
 100 protein, HMB - 45 가 .
 Cytokeratin antigen
 Neuron specific enolase neurofilament

가 ⁶⁾ 2.5~3 cm
 Ratner ⁶⁾ 가 2 cm (), 10
 50%
 , Shaw ⁹⁾ Merkel cell carcinoma
 가
 가
 가
 50~60 Gy가
 가
 cyclophosphamide, methotrexate, 5 - fluorouracil
 60% 가
 가 ³⁾
 가 ⁶⁾ 26~44%
 1
⁴⁾¹⁰⁻¹²⁾ 20~40%

5 30~64% ⁴⁾¹⁰⁻¹²⁾
 가 ⁸⁾ Merkel cell carcinoma
 가
 13
 중심 단어 : Merkel cell carcinoma

REFERENCES

- 1) Kim YH, Choi JY, Lee SY, Choi EC. A case of Merkel cell carcinoma with parotid lymph node metastasis. *Korean J Otolaryngol* 1999;42:258-61.
- 2) Toker C. Trabecular carcinoma of skin. *Arch Dermatol* 1972;105:107-10.
- 3) Fenig E, Brenner B, Katz A, Rakovsky E, Hana MB, Sulkes A. The role of radiation therapy and chemotherapy in the treatment of Merkel cell carcinoma. *Cancer* 1997; 80:881-5.
- 4) Yiengprusawan A, Coit DG, Thaler HT, Urmacher C. Lrapper WK. Merker cell carcinoma: Prognosis and management. *Arch Surg* 1991;126:1514-9.
- 5) Tang CK, Toker C. Trabecular carcinoma of skin: an ultra-structural study. *Cancer* 1978;42:2311-21.
- 6) Ratner D, Nelson BR, Brown MD, Johnson TM. Merkel cell carcinoma. *J Am Acad Dermatol* 1993;29:143-56.
- 7) Lunder EJ, Stern RS. Merkel-cell carcinomas in patients treated with methoxsalen and ultraviolet a radiation. *N Engl J Med* 1998;339:1247-8.
- 8) Akhtar S, Oza KK, Wright J. Merkel cell carcinoma: Report of 10 cases and review of the literature. *J Am Acad Dermatol* 2000;43:755-67.
- 9) Shaw JH, Rumball E. Merkel cell tumour: Clinical behaviour and treatment. *Br J Surg* 1991;78:138-42.
- 10) Pergolizzi J JR, Sardi A, Pelczar M, Conaway GL. Merkel cell carcinoma: An aggressive malignancy. *Am Surg* 1997; 63:450-4.
- 11) McAfee WJ, Morris CG, Mendenhall CM, Werning JW, Mendenhall NP, Mendenhall WM. Merkel cell carcinoma. *Cancer* 2005;104:1761-4.
- 12) Mendenhall WM, Mendenhall CM, Mendenhall NP. Merkel cell carcinoma. *Laryngoscope* 2004;114:906-10.