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Skin Lymphoma: The Illustrated Guide.


It is the third edition of this unique book on skin lymphomas. As stated by the authors in their foreword, the field of cutaneous lymphomas is continuously evolving, mainly due to the application of new techniques and to the identification of precise diagnostic and prognostic categories. One of the consequences is that classifications are changing. The appearance of the previous, second edition of the book was soon followed by the adoption of new classification of primary skin lymphomas, proposed by the World Health Organization (WHO) and European Organization for Research and Treatment of Cancer (EORTC). In recent years, the classification and nomenclature of skin lymphomas have undergone numerous modifications, which have ensured sound basis for their diagnosis and treatment. These new concepts have stimulated the authors to prepare a new edition of this valuable book, thus providing the readers with the latest information on the cutaneous lymphoproliferative disorders.

Cutaneous lymphoproliferative disorders make one of the most dynamic fields of dermatology. Besides modifications in the classification of some entities, attention is focused on the changes and novelties in diagnostic techniques and new markers. In many chapters of this edition, the authors have added section on "teaching cases", where one or more clinicopathologic cases with teaching value are presented and discussed. Like the second edition, each chapter in this third edition is concluded with a résumé, where the major clinical, morphological, immunologic and genetic features of a particular lymphoma are listed, along with treatment guidelines. This edition is enriched with many new photographs and microphotographs.

Chapter 1 describes cutaneous NK/T-cell lymphomas. Progress in immunohistochemistry and molecular genetics has allowed for reclassification of many cases diagnosed in the past as unusual variants of mycosis fungoides (MF), e.g., mycosis fungoides "a tumeur d'emblee" and some other forms of MF, which are now classified in the recently characterized group of aggressive cytotoxic lymphomas. In the past, MF was considered as an "incurable" albeit slowly progressive condition with lethal outcome. Recently, however, an early form of MF consisting of subtle patches of the disease has been recognized. It is estimated that over 90% of patients with early MF neither progress to tumor stage nor show extracutaneous manifestations of the disease. The chapter on MF is accompanied by as many as 314 references.

Chapter 6 is dedicated to the group of aggressive cutaneous cytotoxic lymphomas. The authors stress that these lymphomas show many overlapping clinicopathologic features and that classification may be subjective in some cases. For most of these lymphomas, cytomorphological features are variable and are not associated with prognostic features. Cytomorphology is similar in all these entities and cytomorphological aspect is not useful...
for specific diagnosis, classification and biologic behavior. Cytomorphology should always be analyzed together with clinical, histopathologic, phenotypic and molecular genetic features.

Cutaneous small to medium pleomorphic T-cell lymphoma is described in a separate chapter. It is probably one of the most controversial entities of cutaneous T-cell lymphoma and the debate has not yet been settled. The authors believe that regardless of the controversies concerning the diagnosis and classification of this cutaneous lymphoma, patients presenting with solitary, indolent tumors should be managed in a nonaggressive way. Patients with multiple tumors at presentation require a more aggressive treatment strategy.

In the group of other cutaneous T-cell lymphomas, primary cutaneous peripheral T-cell lymphoma not otherwise specified (NOS) is described.

In section 2, cutaneous B-cell lymphomas are described, while section 3 deals with other cutaneous lymphomas, i.e. intravascular large cell lymphoma, cutaneous lymphomas in immunosuppressed individuals, cutaneous lymphomas in HIV-infected individuals, and other cutaneous lymphomas associated with immune dysregulation. Section 4 deals with cutaneous manifestations of precursor hematologic neoplasms, i.e. blastic plasmocytoid dendritic cell neoplasm and cutaneous lymphoblastic lymphomas; section 5 with specific cutaneous manifestations of leukemias; section 6 with cutaneous manifestations of Hodgkin’s lymphoma; and section 7 with pseudolymphomas of the skin. The last chapter is dedicated to cutaneous “atypical lymphoid proliferation”, including numerous highly useful notes and advice that will contribute to make an accurate diagnosis and avoid errors in the diagnosis of cutaneous lymphoproliferative diseases.

This useful book should find place in the library of every physician involved in the management of these complex conditions. The authors present the topic systematically, using a simple and clear style. Indeed, only true experts in the field could write such a book.

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