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A Case of Classic Kaposi’s Sarcoma Treated with Electron Beam Radiation Therapy

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Keywords: Kaposi’s sarcoma, Classic KS, Radiation therapy

Abstract: We present a case of a 91-year-old male with classic Kaposi’s sarcoma (KS) of the lower back treated with electron beam radiation therapy (EBRT). The patient presented with a new, rapidly growing lesion on his right lower back. He had a positive history of smoking and alcohol use. Laboratory findings were unremarkable, and HIV testing was negative. The patient was treated with EBRT to the primary lesion and to the left knee and right foot. The lesion resolved completely after the radiation treatment. The patient remained disease-free at 6 months of follow-up.

Introduction: Classic KS is a vascular proliferation of endothelial cells with a predilection for extremities, trunk, mucous membranes, and eyelids. It is associated with HIV infection, immunosuppressive therapy, or lymphoma. Treatment options include surgery, chemotherapy, and radiation therapy. Radiation therapy is a viable treatment option for classic KS, with complete response rates of 31-89% reported in most studies.

Case Presentation:

Patient: C.L. is a 91-year-old male of Lithuanian/Baltic ancestry.

History of Present Illness: The patient presented to our office in April 2011 complaining of a new, rapidly growing lesion on his right lower back. The lesion was painful and caused him to limp when walking. He had a history of smoking and alcohol use. Physical examination revealed a violaceous macule on the right lower back.

Medications: None.

Physical Examination: There were several well-demarcated violaceous plaques on the patient's right lower back. The plaques were asymptomatic and not tender on palpation. A punch biopsy of the lesion was performed.

Prognosis: This case highlights the importance of early recognition and prompt treatment of KS. KS is a potentially life-threatening condition, and prompt treatment can lead to cure or improvement in symptoms.

Discussion: Kaposi’s sarcoma (KS), a rare neoplasm of abnormal vascular endothelial cells, was first reported by Moritz Kaposi in 1872. Since then, five subtypes of the disease have been described: classic KS, African cutaneous KS, African lymphadenopathic KS, immunosuppressive therapy KS, and AIDS-associated KS. KS is associated with HHV-8, a virus that has also been implicated in other lymphoproliferative disorders.