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## **Publications**

### **Malignant Melanoma Arising in a Proliferic Nevus Sebaceus with Colonization of Trichoblastoma**

Am J Dermatopathol, November 2022

### **Atrophic Dermatofibrosarcoma Protuberans with Eosinophilic Infiltration**

Dermatopathology, November 2022

### **Homer-Wright Rosette formation in Desmoplastic Spitz Nevi**

American Society of Dermatopathology, 59th annual meeting, Chicago, IL 2022

### **Ossified Pilomatricoma: A Unique Example of Templated Ossification**

American Society of Dermatopathology, 59th annual meeting, Chicago, IL 2022

### **Squamous Cell Carcinoma arising in Desmoplastic Trichilemmoma: Demonstrating a pitfall of CD34 staining**

American Society of Dermatopathology, 59th annual meeting, Chicago, IL 2022

### **Hair Follicle Bulb Region: A Potential Nidus for the Formation of Osteoma Cutis**

Cutis. January 2021

Osteoma cutis is an extraneous ossification of the skin. Heterotopic ossification can be either primary or secondary depending on the presence of a preexisting lesion. Little is known about the morphogenesis of osteoma cutis. A precursor of primary osteoma cutis has been largely overlooked in the literature despite its common occurrence. Small osteocalcific nodules incidentally noted near the lower aspect of the hair bulb are an important precursor to osteoma cutis. They probably form near or within the hair bulb possibly under the influence of bone morphogenetic proteins.

### **Clear Cell Acanthoma: A Review of Clinical and Histologic Variants.**

Dermatopathology (Basel). 2020 Aug 25;7(2):26-37.

### **Angiolipoma-like hemosiderotic fibrolipomatous tumor case report**

American Society of Dermatopathology, 56th annual meeting, Chicago, IL 2019

Hemosiderotic fibrolipomatous tumor (HFT) is a rare lipomatous lesion. It was first described in 2000 as a hemosiderotic fibrohistiocytic lipomatous lesion. HFT is a solitary, circumscribed, and non-encapsulated entity that typically occurs on the foot of older women. Here, we describe a hemosiderotic fibrolipomatous lesion on the forearm of an elderly female with low-power features resembling an angiolipoma.

### **A Case of Aggressive Trichoblastoma in a 70-Year-Old Male**

American Society of Dermatopathology, 56th annual meeting, Chicago, IL 2019

### **Cutaneous Collagenous Vasculopathy Associated with Vessel-Damaging Comorbidities**

American Society of Dermatopathology, 55th annual meeting, Chicago, IL 2018

The exact etiology of this condition is unknown. Recent electron microscopy studies show marked collagen deposition of the outer vessel walls and abnormally spaced collagen bundles called 'Luse' bodies, which suggest a defect in the synthesis and organization of collagen. Most of the reported cases had several comorbidities, including diabetes, hypertension, hyperlipidemia, hypothyroidism, and connective tissue disorders. Interestingly, our patient also had similar comorbidities. It is hypothesized that vascular damage with defective repair leads to abnormal deposition of collagen. Many comorbidities associated with CCV can cause micro-trauma to the peripheral vessels but the exact trigger for defective collagen deposition is unknown. Further studies and increased recognition of this rare cutaneous condition may help elucidate the exact etiology, differentiate it from other cutaneous vascular disorders, and perhaps provide better treatment options for affected patients.

### **Balloon cell changes in Dendritic melanocytes**

American Society of Dermatopathology, 55th annual meeting, Chicago, IL 2018

Occasionally, unusual melanocytic changes are noted in melanocytic neoplasms including neurotization, melanocytes with macromelanosomes, balloon cell change, oncocytic metaplasia, intranuclear inclusions etc. Balloon cell change in common acquired nevi and melanoma is well known. It has been occasionally reported in other melanocytic proliferations, including dysplastic, Spitz, nodal, halo, cellular blue and congenital nevi. To our knowledge, only one case of balloon cell change has previously been reported in common blue nevus. Herein we report a second case.

### **Adenoma (Adenosis Tumor) of Anogenital Mammary-like Glands Presenting as External Hemorrhoids**

American Society of Dermatopathology, 54th annual meeting, Baltimore, MD 2017

The possibility of adenoma of anogenital glands should be considered when evaluating patients with a mass in this area with confirmation by tissue biopsy or aspiration cytology. The morphological pattern of adenoma of anogenital mammary-like glands is like that of a mammary fibroadenoma, and immunostaining may demonstrate the presence of estrogen and progesterone receptors. Important features of the tumor are adenomatous, tubular, and cystic structures with apocrine-like cytologic features, a lobular configuration, and abundant fibrous stroma. Carcinoma arising in anogenital mammary-like glands has been reported.

### **Clear Cell Acanthoma with Trichilemmal Features.**

American Society of Dermatopathology, 54th annual meeting, Baltimore, MD, 2017

Described by Degos and Civatte, clear cell acanthoma (CCA) typically presents as a red to brown dome-shaped papule on the leg of an elderly individual with no gender predilection. Several variations in the clinical and histological appearance of CCA have been reported, including giant, polypoid, pigmented, eruptive, and atypical. Herein we report two cases of a new variant of CCA.

### **Desmin -Positive Atypical Fibroxanthoma or a Collision Lesion?**

American Society of Dermatopathology, 54th annual meeting, Baltimore, MD, 2017

Desmin staining in AFX is typically negative. The differential diagnosis of this lesion includes a variant of atypical fibroxanthoma with aberrant desmin staining and a collision lesion of atypical fibroxanthoma and superficial leiomyosarcoma. We favor the former due to the lack of significant caldesmon staining of the desmin positive part of the neoplasm.

### **Histologic Findings during the Remission Phase of Galli-Galli Disease.**

American Society of Dermatopathology, 54th annual meeting, Baltimore, MD, 2017

We report an additional case of Galli-Galli disease where the biopsy was performed during the waning phase of the disease to rule out lupus erythematosus. The predominant finding, in this case, was suprabasilar acantholysis with only mild focal elongation and pigmentation of rete ridges. A high index of suspicion is needed to diagnose GGD during the waning phase when the predominant finding may only be acantholysis. Clinical pathologic correlation is essential to reach a correct diagnosis.

### **Molluscum Contagiosum Involving an epidermal Cyst in an HIV-Infected Patient.**

Proceedings of Am Acad of Dermatol

### **Unusual Presentation of Encapsulated Fat Necrosis in A Patient with Precipitous Weight Loss**

J Cut Pathol 2015

A 50-year-old female presented with numerous small subcutaneous masses on her thighs and abdomen. These lesions became noticeable after an unexpected 60-pound weight loss. Clinical examination revealed hundreds of pebbly subcutaneous masses on her anterior thighs and right lower abdomen. These lesions were freely mobile and firm on palpation. Microscopic examination revealed typical findings of encapsulated fat necrosis. Our case differs from the previously reported cases in several ways, including the extent of a multiplicity of the lesions, its relation to precipitous weight loss, and finally, its association with several autoimmune disorders. Interestingly autoimmune conditions such as scleroderma have been reported in relation to encapsulated fat necrosis.

### **Verruciform xanthoma of the earlobe in an immunosuppressed patient**

Cutis 2013 Apr; 91(4):198-202

Verruciform xanthoma (VX) is an uncommon mucocutaneous lesion of uncertain etiology. Many etiologies have been proposed without much consensus, including infectious (bacterial, viral, and fungal), degenerative, reactive/reparative, inflammatory, metabolic, multifactorial, and immunosuppressive factors. Verruciform xanthoma of the external ear is exceedingly rare. Herein, we report a rare case of VX occurring on the earlobe at a piercing site in an immunosuppressed patient and discuss the possible pathogenetic mechanism(s).

### **Cutaneous Leishmaniasis Presenting as Eczematous Dermatitis and later as Squamous Cell Carcinoma in a Dermatology Clinic in Ohio.**

J Cut Pathol 2013

We report a case of an 82-year-old Syrian female who had moved to the United States two years earlier, presented with a swollen red area covering temple and upper maxillary area for one year duration. She was treated with cutivate ointment with slight improvement, and after a course of oral antibiotics, the lesion was curetted with an impression of squamous cell carcinoma. The histopathologic examination confirmed a diagnosis of cutaneous leishmaniasis. Cutaneous leishmaniasis can be misinterpreted clinically and histologically as cutaneous malignancy in non-endemic areas and a high index of suspicion is required for proper diagnosis.

### **Trichoblastoma With Apocrine Differentiation**

Am J Dermatopathol. 2002 Aug; 24(4):358-60

Trichoblastoma is a benign neoplasm with primitive hair follicle differentiation. The epithelial cells differentiate toward follicular germ and follicular sheath. We report a trichoblastic neoplasm showing typical features of trichoblastoma as well as areas of apocrine differentiation. Trichoblastoma with apocrine features is very unusual and rarely reported in the literature.

### **Dermatofibroma-like Granular Cell Tumor**

Journal of Cutaneous Pathology 2001; 28:49-52

There have been several reports in the literature of dermatofibromas with granular cells. Here we report a granular cell tumor with the architecture of a dermatofibroma. This is the first report of this histological variant of granular cell tumor.

### **Molluscum Contagiosum involving an Epidermoid Cyst in an HIV-Infected Patient**

J Cutan Pathol 2010 Feb; 37(2):282-6

Molluscum contagiosum (MC) causes characteristic cutaneous lesions that occur mainly in children, sexually active adults, and immunocompromised individuals, especially those with human immunodeficiency virus (HIV) infection. We are presenting a case of MC involving an epidermoid cyst in an AIDS patient with a unique xanthogranuloma-like reaction. Xanthogranulomatous (XG) reactions have been infrequently reported in association with other viral infections; however, poxvirus-associated XG reaction has only been observed in animals. This is the first reported case of MC-associated XG reaction in humans.

### **Plexiform Pattern in Cutaneous Granular Cell Tumor**

J Cutan Pathol 2009 Nov; 36(11):1174-6

Granular cell tumors, considered to be of peripheral nerve sheath origin, can involve various parts of the body with skin and tongue being the most common organs involved. Here we present nine cases of granular cell tumors, which display features different from the classical cutaneous granular cell tumor and have features similar to the earlier described plexiform granular cell tumors.

### **Dermatofibroma-like Atypical Pilar Leiomyoma.**

J Cut Pathol 2009

Atypical pilar leiomyoma is a recently described benign cutaneous neoplasm that has been histologically and prognostically compared to uterine symplastic leiomyoma. We report an additional case of atypical pilar leiomyoma with a scanning magnification impression of dermatofibroma. This case highlights the importance of careful examination of seemingly straightforward dermatofibroma on scanning magnification.

### **Verruciform Xanthoma of the Earlobe Occurring at the Pierced-Site**

J Cut Pathol 2009

Verruciform xanthoma of the external ear is exceedingly rare. Herein, we report a rare case of VX occurring on the earlobe at a piercing site in an immunosuppressed patient and provide a discussion of the possible pathogenetic mechanism(s).

### **Solitary Hemosiderotic Xanthoma, A Rare Variant of Xanthoma**

J Cut Pathol 2004; 31; 101

A 26-year-old male presented with a 0.5 cm pigmented lesion on right anterior parietal scalp with a clinical impression of dysplastic nevus versus melanoma. The lesion was resected and submitted for histologic examination. Histologic examination revealed aggregates of foamy histiocytes (xanthoma cells) containing prominent coarse pigment in the cytoplasm. An iron stain brightly decorated the cytoplasmic pigment. This is the first case report of a solitary hemosiderotic xanthoma.

### **Subcutaneous Plexiform Spiradenoma**

J Cut Pathol 2004; 31; 133

Subcutaneous spiradenoma with a plexiform growth pattern is a rare phenomenon. Herein we report a case of an entirely subcutaneous spiradenoma with plexiform pattern. The plexiform growth pattern is more commonly seen in neural tumors such as neurofibroma, schwannoma, and granular cell tumor.

### **Cutaneous Strongyloides Stercoralis Infection: An Unusual Presentation**

J Am Acad Dermatol. 2003 Aug; 49(2 Suppl Case Reports): S157-60

Strongyloides stercoralis is a widespread, soil-transmitted intestinal nematode common in tropical and subtropical countries. Human beings contract strongyloidiasis by penetration of filariform larvae into the skin or mucous membrane after contact with contaminated soil. Chronic strongyloidiasis acquired in endemic areas may last decades and gives rise to various dermatologic lesions, the most characteristic of which is larva currens, a serpiginous, creeping urticarial eruption. In disseminated strongyloidiasis, the characteristic skin lesions are widespread petechiae and purpura. We present a case of disseminated strongyloidiasis with an unusual manifestation mimicking a drug rash and review the dermatologic manifestations of strongyloidiasis infestation.

### **Collision Tumors of Malignant Melanoma and Basal Cell Carcinoma: A Report of Three Cases**

J Cut Pathol. Jan 2003, 48-49

This report describes three rare cases of collision tumor of basal cell carcinoma and malignant melanoma clinically presented as single lesions. We conclude that in a collision tumor, basal cell carcinoma and melanoma cells may be intimately associated with each other and may have a similar morphologic appearance. Therefore, accurate diagnosis of a collision tumor requires a high degree of suspicion and judicious use of immunostains.

### **Immunoglobulin A-associated lymphocytic vasculopathy: a clinicopathologic study of eight patients**

J Cutan Pathol 2002 Nov;29(10):596-601

Cutaneous IgA-associated vasculitis can be a clue to Henoch-Schönlein purpura whereby prominent and predominant IgA deposits within the cutaneous vasculature provoke a leukocytoclastic vasculitis. A non-necrotizing lymphocytic purpuric vascular reaction is one manifestation of vascular IgA deposition in the skin. A subpopulation of human lymphocytes bears surface Fc receptor and/or C3 receptors ('complement receptor lymphocytes'), which can bind circulating immune complexes (ICs) or C3 generated via activation of the alternative complement cascade. Thus, circulating ICs are a potential pathogenic basis of this eruption.

### **Trichoblastic Carcinoma: A Report of Two Cases**

Dermatol Surg 2001 Jul;27(7):663-6

Trichoblastoma is a benign neoplasm with primitive hair follicle differentiation. The concept of its malignant counterpart is poorly understood. We report two trichoblastic neoplasms that show histologic features of malignancy.

### **Immunoglobulin-A Associated Lymphocytic Vasculitis: A Clinical and Pathologic Entity Resembling Pigmentary Purpura**

Modern Pathology. Jan 2001;14(1): 73A (416)

### **Myofibroblastic Differentiation in Dermatofibromas**

J Cut Pathol. Nov 2000, 576

Smooth muscle differentiation is a feature of dermatofibroma regardless of whether they exhibit morphologic evidence of muscle differentiation. This supports the concept that many dermatofibromas are reactive lesions showing the myofibroblastic differentiation characteristic of wound healing be a secondary intention.

### **When is Surgical Treatment not appropriate for Morphea?**

Ann Plast Surg 2000; 45:199-201

Morphea is an inflammatory cutaneous disease that can be mistaken for a soft-tissue neoplasm. The authors report two cases of morphea resected surgically before the histological diagnosis of morphea was rendered. They present these cases to alert surgeons to the pitfall of inappropriate surgical treatment of an inflammatory condition.

### **Desmoplastic Malignant Melanoma with Bone formation**

Am J Dermatopathol 2000; 22(4):348

Bone formation or osseous metaplasia is exceedingly rare in lesions of malignant melanoma. Herein we report a case of malignant melanoma with osseous metaplasia

### **Plexiform Granular Cell Tumor**

Am J Dermatopathol 2000; 22(4):344

### **Saved By the Gross Description: Laboratory Technique Compromised by Absence of Gross Description**

Dermatopathology: Practical and conceptual. 2000; 6(3):296-297

This paper underscores the importance of gross description in Dermatopathology.

### **Exophytic Pilomatricoma, Clinically Resembling Keratoacanthoma, With Peri-pilar Differentiation: PERIPILOMATICOMA.**

J Cut Pathol. Oct 1999, PP24, 466

This is the first reported case of an exophytic pilomatricoma resembling keratoacanthoma.

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