Vitiligo Associated with Esophageal Adenocarcinoma

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ABSTRACT

Vitiligo is a disease that results in depigmented areas in the skin. It may develop at any age but the average age at onset is 20 years. Association of vitiligo and melanoma has been commonly reported, but malignancies other than melanoma have been rarely associated with vitiligo. We report a 73-year-old patient with new onset vitiligo who developed esophageal adenocarcinoma in the following years.

Keywords: Esophageal adenocarcinoma, vitiligo, thyrosinase, malignant melanoma

INTRODUCTION

Vitiligo is an acquired auto-immune disease of still unknown etiology. It usually begins after birth and although it can develop in any age, the average age at onset is about 20 years.[1] It is not usually associated with malignancies other than melanoma. Autoantibodies to tyrosinase may explain the association of vitiligo and malignant melanoma.[2] There are some reports of associated internal malignancies such as thyroid carcinomas,[3] laryngeal carcinoma[4] and gastric carcinoma.[5] We report a case of co-existent esophageal adenocarcinoma and vitiligo.

CASE REPORT

A 73-year-old man a known case of vitiligo for 3 years, presented with progressive dysphagia. After clinical and radiological evaluation the diagnosis of esophageal adenocarcinoma was confirmed and standard esophagectomy was performed for him. He had the history of white depigmented patches on his scalp [Figure 1] and hands [Figure 2], since 3 years ago and had been treated with the diagnosis of vitiligo. There was no history of vitiligo, malignancies and other disease in the relatives of the patient.

DISCUSSION

Vitiligo is a common acquired auto-immune disease of still unknown etiology. The association of vitiligo and melanoma has been commonly reported, but malignancies other than melanoma have been rarely associated with vitiligo.
A recent review for risk of cancer development in patients with autoimmune and chronic inflammatory diseases, demonstrates that chronic inflammation and autoimmunity are associated with the development of particular malignancies.[6]

Due to prevalence of vitiligo, existence of vitiligo and malignancy in a patient may be a coincidence rather than an association. Despite this, in the case of new-onset vitiligo in an old age individual, the probability of internal malignancies should be considered. An immune-mediated mechanism may explain this association but more investigations are required about the coexistence of new-onset vitiligo and malignancies other than melanoma in adults.

CONCLUSIONS

The possibility of associated malignancy should always considered in the case of late-onset vitiligo and it is wise to evaluate the patient for presence of malignancies of the skin and internal organs at the time of diagnose of late-onset vitiligo and following the patient carefully for the next years.

REFERENCES


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