



Verrucous Carcinoma of the Knee: An Unusual Location

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Clinical Image

An 81-year-old patient presented an exophytic lesion for two years with progressive growth in the last month. After complete excision, histological examination revealed a verrucous carcinoma. Polymerase chain reaction excluded the presence of human papillomavirus. During two-years follow-up there is no clinical or radiological signs of recurrence.

Verrucous carcinoma is known to be a rare, locally invasive, well-differentiated low-grade squamous cell carcinoma that may evolve from the human papillomavirus (Figure 1). It preferentially occurs on the oropharyngeal mucosa, the urogenital mucosa, the soles, and sites of inflammation or chronic irritation (Figure 2). In contrast to its malignant clinical picture, the tumor grows locally invasive but is histologically benign and metastasizes rarely [1-3]. It is therefore pertinent to obtain adequate radiological studies when planning for surgical resection of this tumor. Histologically, it can be mistaken for other entities including verruca vulgaris, keratoacanthoma, and pseudoepitheliomatous hyperplasia, often delaying the appropriate diagnosis and treatment.

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Figure 1: Human papillomavirus.



Figure 2: Human papillomavirus.

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