

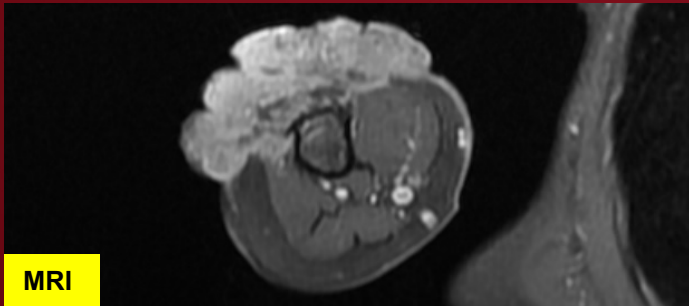
A Rare Case of Extensive Basal Cell Carcinoma with Invasion of the Humerus: Excision and Immediate Reconstruction with Fibula Allograft, Plating, and Latissimus Dorsi Flap



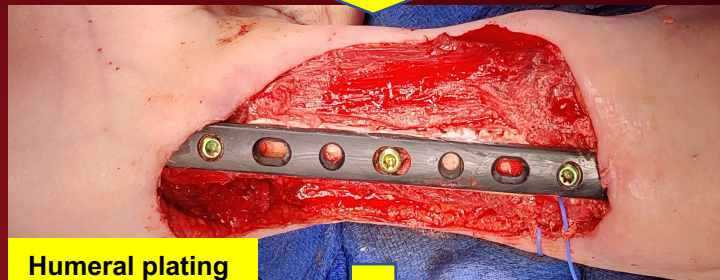
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- A 73 yo female, presenting with an extensive Basal Cell Carcinoma(BCC) of the right arm for 5 years.
- MRI showed a 7x3.1x7.2 cm mass with extension to involve the deltoid and biceps, abutting the humerus with mild periosteal reaction present.



- No distant metastasis.
- Wide local excision was performed.



- Reconstruction included a fibula allograft, plating, and latissimus dorsi flap with split-thickness skin graft.
- Complicated with a transient radial nerve palsy, which is improving with physical therapy.
- Although BCC invasion of a long bone is extremely rare, the gold standard treatment is en bloc surgical resection, which is only possible through the collaboration of General Surgery, Orthopedics, and Plastic Surgery.^{1,2}

References :

1. Al Majed BM, et al. Direct long bone invasion by Basal cell carcinoma: a case report and review of the literature. Eplasty 2013 Nov13.
2. Di Lorenzo S, et al. A Rare Case of Giant Basal Cell Carcinoma of the Abdominal Wall: Excision and Immediate Reconstruction with a Pedicled Deep Inferior Epigastric Artery Perforator(DIEP) Flap. Am J Case Rep. 2017 Dec

