

# Images in Haematology

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66 years old female patient was admitted to the hospital with violet-red papillary skin lesion. The lesions had appeared one month ago on the posterior left leg and increased in size and spread to the upper extremities and the body. Physical examination revealed papillary skin lesion on the right leg 10 x 15 cm in size covered with black squamous crust. There are numerous violet lesions changing between 1 to 15 cm in size. Spleen and liver was not palpable. Thoracic and abdominal CT were normal. There was no lymphadenopathy. WBC and biochemical findings were normal and bone marrow aspiration biopsy revealed no pathological finding. Biopsy taken from the large lesion on the right leg revealed mononuclear infiltration starting from papillary dermis to subcutaneous tissue with perineural and angiocentric involvement. The cells were LCA+, CD20-, CD3- and UCHL-1 negative. Flow cytometric analysis from the cells aspirated from the lesions showed that these lymphoid cells with large cytoplasm and cytoplasmic granules were CD56+ and accepted as NK cell lymphoma. The patient received 3 courses of CNOP followed by regression of the lesions but the patient went a downhill course after the third course and died.

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