Hideko Kamino, M.D.

Director of Dermatopathology, New York University; Associate Professor
Departments of Dermatology and Pathology
NYU Dermatopathology Unit
iPathology Consultanting Dermatopathologist

Medical Specialties

Dermatology

Medical Expertise

Dermatopathology

Associations

Past President of the American Society of Dermatopathology
Editorial Board of the American Journal of Dermatopathology

Education

UCLA (Pathology), Residency Training	1983-1984
Mount Sinai Medical Center (Pathology), Residency Training	1981-1983
NYU Medical Center (Dermatopathology), Clinical Fellowships	1978-1979
Univ. Nacional Autonoma De Mexico, Medical Education	1963-1970

Board Certification

Dermatopathology	1985
Anatomic & Clinical Pathology	1984

Research Interests

Malignant Melanoma and Melanocytic Nevi Fibrohistocytic Lesions of the Skin

Publications

Retiform purpura and digital gangrene secondary to antiphospholipid syndrome successfully treated with sildenafil

Gonzalez, Mercedes E; Kahn, Philip; Price, Harper N; Kamino, Hideko; Schaffer, Julie V

2011 Feb;147(2):164-7, Archives of dermatology

— id: J0207161, year: 2011, vol: 147, page: 164, stat: Journal Article,

Familial benign chronic pemphigus (Hailey-Hailey disease)

Hunt, Raegan; O'Reilly, Kathryn; Ralston, Jonathan; Kamino, Hideko; Shupack, Jerome L

2010 Nov 15;16(11):14, Dermatology online journal

We present an atypical case of familial benign chronic pemphigus (Hailey-Hailey disease) that manifested with relapsing, flaccid vesicles and erosions, which were limited to the upper chest, anterior aspect of the neck, and anterior aspects of the upper arms without intertriginous involvement. Although individual eruptions in this patient demonstrated asymmetry, relapses did not obey a segmental distribution. To the best of our knowledge, no other patient has been described with symmetric lesions that were localized solely to the anterior upper body without a prior history of lesions at commonly affected disease sites, which include skin folds, the back, and the posterior and lateral aspects of the neck. This unusual presentation of Hailey-Hailey disease highlights the variable nature of the disease
— id: J0197829, year: 2010, vol: 16, page: 14, stat: Journal Article,

Hypertrophic discoid lupus erythematosus
Farley-Loftus, Rachel; Elmariah, Sarina B; Ralston, Jonathan; Kamino, Hideko; Franks, Andrew G Jr
2010 Nov 15;16(11):1, Dermatology online journal
Hypertrophic discoid lupus erythematosus is a distinct form of chronic cutaneous (discoid) lupus, which is characterized by hyperkeratotic plaques that typically are observed over the face, arms, and upper trunk. We present the case of a 43-year-old man with verrucous plaques that were distributed symmetrically over the face, who initially was treated with oral antibiotics and topical glucocorticoids for acne vulgaris. A biopsy specimen confirmed the diagnosis of hypertrophic discoid lupus erythematosus. The clinical and histopathologic features of this clinical variant are reviewed
— id: J0198008, year: 2010, vol: 16, page: 1, stat: Journal Article,

Pemphigoid gestationis
Lu, Phoebe D; Ralston, Jonathan; Kamino, Hideko; Stein, Jennifer A
2010 Nov 15;16(11):10, Dermatology online journal
Pemphigoid gestationis is a rare autoimmune blistering disease of pregnancy. It is characterized by pruritic, urticarial plaques with the development of tense vesicles and bullae within the lesions. Pemphigoid gestationis has been associated with premature delivery, small-for-gestational-age infants. Recurrences with subsequent pregnancies are often more severe. Oral glucocorticoids are the mainstay of therapy. Differentiation of pemphigoid gestationis from pruritic urticarial papules and plaques of pregnancy is essential because management and outcomes differ. In instances in which clinical diagnosis is difficult, direct immunofluorescence tests, immunoblots, or ELISA studies of anti-basement-membrane zone antibodies are useful in establishing the diagnosis
— id: J0197996, year: 2010, vol: 16, page: 10, stat: Journal Article,

Elastic fiber pattern in regressing melanoma: a histochemical and immunohistochemical study
Kamino H; Tam S; Roses D; Toussaint S
2010 Jul;37(7):723-9., Journal of cutaneous pathology
Background: Although histopathologic identification of regression of melanoma is usually straightforward, sometimes it can be difficult to distinguish it from scarring fibrosis. Therefore, this study investigates the elastic fiber pattern in melanomas associated with either regression or scars. Methods: We compared 33 invasive melanomas with the fibrosing stage of regression to 10 cases of invasive melanomas with scarring fibrosis. None of the regression cases had a prior surgical procedure. Elastic fiber patterns were evaluated with Verhoeff's elastic van Gieson stain (EVG) and elastin immunostain. Results: Elastin immunostain was superior to EVG in revealing the elastic fiber patterns. Both regression and scars had decreased to absent elastic fibers in the areas of fibrosis. However, areas of regression had a well-defined compressed layer of thin elastic fibers pushed down from the papillary dermis to the base of the fibrosis. In contrast, the base of scars lacked this compressed elastic layer and had instead an abrupt transition to the thick elastic fibers of the spared reticular dermis. Conclusions: We have identified distinct changes of the elastic tissue network, which more accurately define the presence of regression in melanoma and distinguish it from scarring fibrosis Kamino H, Tam S,

Roses D, Toussaint S. Elastic fiber pattern in regressing melanoma: a histochemical and immunohistochemical study
— id: J0185931, year: 2010, vol: 37, page: 723, stat: Journal Article,

Acquired perforating calcific collagenosis after topical calcium chloride exposure

Patel, Rishi R; Zirvi, Monib; Walters, Ruth F; Kamino, Hideko

2010 May 1;37(5):593-6., Journal of cutaneous pathology

A 24-year-old healthy man presented with a 6-week history of numerous umbilicated coalescing erythematous papules with some scale and crust on his anterior medial thighs. The eruption began 1 to 2 weeks after he spilled calcium chloride rock salts on his pants while salting the sidewalk during a snow storm. The salts dissolved and remained in contact with his skin for at least 4 hours until he was able to change clothes. A skin biopsy shows thick and thin collagen fibers with partial calcification in the papillary and upper reticular dermis associated with a sparse infiltrate of neutrophils, lymphocytes and mononuclear histiocytes. There are foci of transepidermal elimination of calcified fibers with adjacent epidermal hyperplasia and ortho- and parakeratosis. Von Kossa stain highlights calcification of the fibers, and trichrome stain confirms the fibers are collagen. A Verhoeff-van Gieson stain shows no abnormality of elastic fibers. The patient was treated with topical betametasone diproprionate cream twice daily for 3 weeks, as well as a short course of oral levofloxacin and topical gentamicin cream. The lesions resolved over 3 weeks with residual scarring. We report a unique case of acquired perforating calcific collagenosis secondary to topical calcium chloride exposure. Patel RR, Zirvi M, Walters RF, Kamino H. Acquired perforating calcific collagenosis after topical calcium chloride exposure
— id: J0181389, year: 2010, vol: 37, page: 593, stat: Journal Article,

Morphea, diabetes mellitus type I, and celiac disease: case report and review of the literature

Firoz, Elnaz F; Kamino, Hideko; Lehman, Thomas J A; Orlow, Seth J

2010 Jan 1;27(1):48-52, Pediatric dermatology

An 11-year-old girl with a history of diabetes mellitus type I and celiac disease presented with multiple, depressed patches of purple-brown skin on the right lower extremity and central back, with histopathologic features of early morphea. Though morphea may coexist with other autoimmune diseases, its presentation with both diabetes mellitus type I and celiac disease has not yet been described
— id: J0185337, year: 2010, vol: 27, page: 48, stat: Journal Article,

Collision Tumor of Primary Laryngeal Mucosal Melanoma and Invasive Squamous Cell Carcinoma with IL-17A and CD70 Gene Over-Expression

Sirikanjanapong, Sasis; Lanson, Biana; Amin, Milan; Martiniuk, Frank; Kamino, Hideko; Wang, Beverly Y

2010 Dec;4(4):295-9, Head & neck pathology

The most common primary malignancy of the larynx is the squamous cell carcinoma (SCC). The primary malignant melanoma is quite rare in this location. Less than 60 cases of laryngeal melanomas have been reported to date. To our knowledge, collision primary malignant melanoma and invasive squamous cell carcinoma in the vocal cords has not been reported. We report a 53-year-old male patient who was diagnosed with a collision tumor of laryngeal melanoma and invasive SCC. Multiple Th17 pathway related genes including CTLA-4, IL-17A-F, PLZF, FoxP3, RorgammaT, CD27, and CD70 were analyzed by reverse transcriptase-polymerase chain reaction (Rt-PCR) in this case. Both IL-17A and CD70 genes were detected in this case of collision tumor. The results may define useful biomarkers for early diagnosis of mucosal melanoma and open an immunotherapeutic field for clinical management with the potential benefit from the immunomodulators that enhance both genes
— id: J0196947, year: 2010, vol: 4, page: 295, stat: Journal Article,

Facial follicular porokeratosis: a case report

Wang, Nadia S; Gruson, Lisa M; Kamino, Hideko

2010 Oct;32(7):720-2, American journal of dermatopathology
Porokeratosis is a disorder of keratinization, characterized clinically by a peripheral keratotic ridge and histologically by the cornoid lamella. We describe a patient with follicular porokeratosis with a distinctive clinical presentation. We believe that follicular porokeratosis is a unique histopathologic variant of porokeratosis, with cornoid lamellae centered in follicular infundibula. Further, this is the only report of follicular porokeratosis involving the face exclusively
— id: J0193005, year: 2010, vol: 32, page: 720, stat: Journal Article,

Acral lymphomatoid papulosis
Yancovitz, Molly; Walters, Ruth F; Kamino, Hideko; Brown, Lance H
2010 Mar;62(3):530-1, Journal of the American Academy of Dermatology
— id: J0184578, year: 2010, vol: 62, page: 530, stat: Journal Article,

Spitzoid melanoma
Kamino, Hideko
2009 Nov-Dec;27(6):545-55, Clinics in dermatology
Because spitzoid melanoma shares many histopathologic features with Spitz nevus, it is one of the most difficult lesions to diagnose in dermatopathology. Uncertainty exists in the medical literature about how to diagnose melanocytic proliferations including Spitz nevus and spitzoid melanoma. A misdiagnosis of a melanoma as Spitz nevus is one of the most frequent causes of malpractice lawsuits in surgical pathology and dermatopathology. This contribution provides a review of the clinical presentation, histopathology, ancillary studies, treatment, and the differential diagnosis of spitzoid melanoma
— id: J0181122, year: 2009, vol: 27, page: 545, stat: Journal Article,

Elastic fiber pattern in scleroderma/morphea
Walters, Ruth; Pulitzer, Melissa; Kamino, Hideko
2009 Sep;36(9):952-7, Journal of cutaneous pathology
BACKGROUND: Scleroderma/morphea is characterized by expansion of the dermis with thickened collagen bundles and loss of CD34(+) dermal dendrocytes. Variable elastic fiber changes have been described, but to our knowledge, no systematic study of the elastic fiber pattern correlated with CD34 expression has been reported. METHODS: To better define the typical elastic fiber morphology, we examined seven cases of normal skin and 28 cases of scleroderma/morphea ranging from inflammatory to sclerosing stages. All but four biopsies were submitted with a clinical impression of either scleroderma or morphea. CD34 immunohistochemistry was performed on 26 biopsies with available tissue. RESULTS: Elastic van Gieson stain showed preservation of elastic fibers in all cases. In addition, straightening with parallel orientation and compression between thickened collagen bundles was frequently present and was graded as limited in 46% and diffuse in 54% of cases. The extent of elastic fiber alteration correlated with the degree of sclerosis. A variable loss of CD34(+) dermal dendritic cells was seen in all cases. CONCLUSION: This study confirms the preservation and frequent presence of parallel, straightened and compressed elastic fibers in scleroderma/morphea and suggests that the elastic fiber pattern, in addition to CD34 immunohistochemistry, may serve as a useful diagnostic adjunct
— id: J0175052, year: 2009, vol: 36, page: 952, stat: Journal Article,

Cutaneous piloleiomyomata
Smith, Gideon; Heidary, Noushin; Patel, Rishi; Rosenman, Karla; Meehan, Shane A; Kamino, Hideko; Sanchez, Miguel
2009 Aug 15;15(8):10, Dermatology online journal
A 49-year-old man presented with an eight-month history of intermittently painful, subcutaneous nodules that were increasing in size, number, and pain intensity. A biopsy specimen showed smooth muscle proliferation, which also

stained positive for actin, and was consistent with piloleiomyoma. The patient was placed initially on gabapentin and then nifedipine with very limited success in pain control. The lesions continued to proliferate, and the patient was referred to surgery for excision
— id: J0181384, year: 2009, vol: 15, page: 10, stat: Journal Article,

Porokeratotic eccrine ostial and dermal duct nevus: a report of 2 cases and review of the literature
Wang, Nadia S; Meola, Thomas; Orlow, Seth J; Kamino, Hideko
2009 Aug;31(6):582-6, American journal of dermatopathology
Porokeratotic eccrine ostial and dermal duct nevus (PEODDN) is a rare disorder of keratinization involving the intraepidermal eccrine duct (acrosyringium). We detail two examples of this unique clinicopathological entity--one with a more typical clinical presentation and one with a solitary lesion and late adult onset. In addition, we discuss the distinctive histologic and immunohistochemical findings and review the literature
— id: J0174551, year: 2009, vol: 31, page: 582, stat: Journal Article,

Systemic drug-related intertriginous and flexural exanthema (SDRIFE)
Elmariah, Sarina B; Cheung, Wang; Wang, Nadia; Kamino, Hideko; Pomeranz, Miriam K
2009 Aug 15;15(8):3, Dermatology online journal
A 72-year-old man with a history of metastatic melanoma presented with a two-day history of erythematous and edematous plaques, with scattered bullae on the neck, chest, axillae, and inguinal and gluteal folds, which began five days after infusion of an experimental drug. The clinical and histopathologic findings were consistent with systemic drug-related intertriginous and flexural exanthema (SDRIFE), which is an uncommon drug reaction that results in symmetric erythema that affects the buttocks, groin, and/or thighs as well other flexural folds. The clinical manifestations of SDRIFE are highly characteristic and include distinctive primary cutaneous lesions with a specific distribution and course; however, heterogeneity exists with respect to histopathologic features, skin test results, and in vitro investigations. The exact mechanism of SDRIFE remains unknown but is thought to result from a type IV delayed hypersensitivity immune response. Treatment is symptomatic and includes topical or oral glucocorticoids
— id: J0185933, year: 2009, vol: 15, page: 3, stat: Journal Article,

Keratitis-ichthyosis-deafness (KID) syndrome
Gonzalez, Mercedes E; Tlougan, Brook E; Price, Harper N; Patel, Rishi; Kamino, Hideko; Schaffer, Julie V
2009 Aug 15;15(8):11, Dermatology online journal
A 21-year-old man presented with a life-long history of diffusely thickened skin with a grainy-to-ridged surface, verrucous perioral plaques with radial fissures, and diffuse palmoplantar keratoderma with a stippled appearance. These skin findings were accompanied by sensorineural hearing loss and keratoconjunctivitis, a clinical triad diagnostic of keratitis-ichthyosis-deafness (KID) syndrome. The patient also had a history of recurrent infections and cysts on the scalp. This report draws attention to inflammatory nodules (representing ruptured folliculitis), cysts, and recurrent infections on the scalp as manifestations of KID syndrome and reviews the increasingly recognized risk of follicular tumors and squamous-cell carcinomas in patients with this conditions
— id: J0181383, year: 2009, vol: 15, page: 11, stat: Journal Article,

Porokeratosis palmaris et plantaris disseminata or a disseminated late-onset variant of porokeratotic eccrine ostial and dermal ductal nevus (PEODDN) with follicular involvement
Hartman, Rachael; Rizzo, Carina; Patel, Rishi; Kamino, Hideko; Shupack, Jerome L
2009 Aug 15;15(8):8, Dermatology online journal
A 48-year-old woman presented with a four-year history of pruritic, hyperkeratotic, spiny papules that began on her chest and spread to her extremities, groin, palms, face, and scalp where it caused non-scarring alopecia. Histopathologic

features included cornoid lamella, which is the hallmark of porokeratosis. However, the patient's constellation of findings does not meet diagnostic criteria for any of the five clinical variants of porokeratosis. Her presentation is most compatible with either porokeratosis palmaris et plantaris disseminata (PPPD), which is a rare variant of punctate porokeratosis that can involve any area of the body or late-onset porokeratotic eccrine ostial and dermal ductal nevus (PEODDN), which is a rare, benign hamartoma of the eccrine sweat glands with porokeratotic histopathologic features that has been reported to occasionally have systemic involvement. Treatment of either condition is difficult although there have been reported successes with cryotherapy, surgical excision, and CO2 laser. Since porokeratosis is a disorder of keratinization and our patient has prominent follicular involvement, isotretinoin may be another reasonable therapeutic option
— id: J0181386, year: 2009, vol: 15, page: 8, stat: Journal Article,

Eosinophilic fasciitis/generalized morphea overlap
Heidary, Noushin; Cheung, Wang; Wang, Nadia; Kamino, Hideko; Franks, Andrew G Jr
2009 Aug 15;15(8):2, Dermatology online journal
A 50-year-old woman presented with a three-month history of violaceous, non-tender, indurated plaques on the chest, abdomen, breasts, and proximal portions of the arms and legs. An incisional biopsy specimen showed changes consistent with a diagnosis of inflammatory morphea. Over the course of one year, the patient began to develop signs and symptoms suggestive of a diagnosis of eosinophilic fasciitis, which included the characteristic groove sign on the upper extremities. Although our patient did not exhibit peripheral or histopathologic evidence of eosinophilia, the diagnosis of eosinophilic fasciitis could still be made because the aforementioned phenomena are not required for diagnosis. Multitude treatment regimes have been reported in the literature as single case reports or small patient series. Our patient was maintained on methrotrexate, oral glucocorticoids, and etanercept with improvement of skin lesions and mobility
— id: J0185171, year: 2009, vol: 15, page: 2, stat: Journal Article,

The use of elastin immunostain improves the evaluation of melanomas associated with nevi
Kamino, Hideko; Tam, Sam; Tapia, Beatriz; Toussaint, Sonia
2009 Aug;36(8):845-52., Journal of cutaneous pathology
Background: Twenty to 30% of malignant melanomas are associated with melanocytic nevi; however, sometimes it is difficult to distinguish the melanoma from the nevus by routine histology. We have previously described distinctive patterns of elastic fibers in nevi and in melanomas. Methods: We analyzed elastic fiber patterns using elastin immunostain and elastic van Gieson (EVG) stain in 30 cases of invasive melanomas associated with nevi, 12 control melanocytic nevi and 14 control invasive melanomas. Results: Elastin immunostain was superior to EVG in showing the elastic fiber patterns. In nevi, the elastic fibers were preserved between nests and often around individual melanocytes. In contrast, melanomas had markedly decreased elastic fibers in the stroma and within the nests of melanocytes. The melanoma pushed down the pre-existing thin elastic fibers of the papillary dermis, forming a compressed layer at its base, which separated the melanoma from the nevus. On sun-damaged skin, the solar elastosis had similar elastin and EVG patterns. In three cases with dense inflammation, the layer of elastic fibers between melanoma and nevus was still present but less evident. Conclusions: The distinctive patterns of elastic fibers, best shown by the elastin immunostain, were helpful in evaluating melanomas associated with melanocytic nevi. Kamino H, Tam S, Tapia B, Toussaint S. The use of elastin immunostain improves the evaluation of melanomas associated with nevi
— id: J0162037, year: 2009, vol: 36, page: 845, stat: Journal Article,

Neurovascular hamartoma
Lee, Arnold; Heidary, Noushin; Altiner, Ahmet; Votava, Henry; Kamino, Hideko; Sanchez, Miguel
2009 Aug 15;15(8):21, Dermatology online journal
A 29-year-old man presented with a large, asymptomatic, brown, hyperpigmented, depressed plaque over his left upper

back, which included the scapular area, since childhood. Histopathological analyses of the biopsy specimens was consistent with a rare entity known as neurovascular hamartoma. This uncommon lesion has been reported in two publications, either as a possible marker of the malignant rhabdoid tumor or as a hamartomatous tongue lesion in children. Due to its possible association with the aggressive and often fatal rhabdoid tumor, periodic examination of this lesion may be warranted
— id: J0185371, year: 2009, vol: 15, page: 21, stat: Journal Article,

Genital porokeratosis
Liang, Christine; Batra, Priya; Patel, Rishi; Kamino, Hideko
2009 Aug 15;15(8):23, Dermatology online journal
A 22-year-old man presented with a two-year history of warts on the penis, scrotum, and thighs. Physical examination showed multiple annular plaques with thin, threadlike borders on the penis and scrotum. The biopsy specimen showed a cornoid lamella with underlying dyskeratotic cells that was consistent with porokeratosis. Genital porokeratosis is a rare condition that may be misdiagnosed as a sexually transmitted disease
— id: J0181381, year: 2009, vol: 15, page: 23, stat: Journal Article,

POEMS syndrome (polyneuropathy, organomegaly, endocrinopathy, monoclonal gammopathy, and skin changes)
Liang, Christine; Gonzalez, Mercedes; Patel, Rishi; Meehan, Shane; Kamino, Hideko; Franks, Andrew G Jr
2009 Aug 15;15(8):9, Dermatology online journal
A 62-year-old woman with hypothyroidism presented with a seven-year history of paresthesias, itching, and edema of the skin. Physical examination showed indurated, edematous plaques on the lower extremities. A biopsy specimen showed increased mucin deposition that was consistent with myxedema, and monoclonal IgM was observed on immunofixation. The constellation of findings, which included paresthesias, endocrinopathy, monoclonal gammopathy, and skin changes was consistent with POEMS (polyneuropathy, organomegaly, endocrinopathy, monoclonal gammopathy, and skin changes) syndrome, which is a rare multisystemic disease that is associated with an underlying plasma-cell dyscrasia
— id: J0181385, year: 2009, vol: 15, page: 9, stat: Journal Article,

Interstitial granulomatous dermatitis with arthritis
Jabbari, Ali; Cheung, Wang; Kamino, Hideko; Soter, Nicholas A
2009 Aug 15;15(8):22, Dermatology online journal
A 54-year-old woman with a history of arthritis presented for a long-standing history of symmetric, indurated plaques on her thighs and lateral aspects of the trunk. Histopathologic examination of skin biopsy specimens was consistent with interstitial granulomatous dermatitis, and a diagnosis of interstitial granulomatous dermatitis with arthritis was made. Administration of topical potent glucocorticoids, intralesional glucocorticoids, and narrow-band ultraviolet B phototherapy, in addition to continuation of systemic glucocorticoids and methotrexate, resulted in improvement of her cutaneous and musculoskeletal disease
— id: J0185932, year: 2009, vol: 15, page: 22, stat: Journal Article,

Histopathology and X-ray microanalysis of foreign material on facial keratoses
Fernandez, Martin P; Wang, Nadia S; Terzakis, John A; Meehan, Shane A; Kamino, Hideko
2009 May;31(3):232-5, American journal of dermatopathology
Opaque exogenous material was frequently observed on the surface of keratoses during routine sign out by one of us (H.K.). To investigate this material further, 300 consecutive seborrheic keratoses were reviewed: 100 cases from the face of women, 100 cases from the face of men, and 100 cases from the trunk of men and women. All cases were evaluated by light microscopy for the presence and quantity of exogenous material, and 14 cases were studied by x-ray

microanalysis to assess its composition. The material was present on 54% of facial keratoses from predominantly older women (mean age 67 years), 5% of facial keratoses from men, and 9% of truncal keratoses from men and women. The x-ray microanalysis showed the presence of a variety of elements, including titanium (13 cases), silicon (12 cases), iron (9 cases), aluminum (8 cases), magnesium (8 cases), zinc (4 cases), barium (2 cases), and bismuth (2 cases). We believe that the exogenous material represents cosmetic products such as colored facial cosmetics, sunscreens, and moisturizers. Further, because the exogenous material was found predominantly on facial keratoses of older women, the presence of this material in a specimen may serve as a clue to the patient's gender, age, and biopsy site
— id: J0185934, year: 2009, vol: 31, page: 232, stat: Journal Article,

Association of MDM2 SNP309, age of onset, and gender in cutaneous melanoma
Firoz, Elnaz F; Warycha, Melanie; Zakrzewski, Jan; Pollens, Danuta; Wang, Guimin; Shapiro, Richard; Berman, Russell; Pavlick, Anna; Manga, Prashiela; Ostrer, Harry; Celebi, Julide Tok; Kamino, Hideko; Darvishian, Farbod; Rolnitzky, Linda; Goldberg, Judith D; Osman, Iman; Polsky, David
2009 Apr 1;15(7):2573-80, Clinical cancer research
PURPOSE: In certain cancers, MDM2 SNP309 has been associated with early tumor onset in women. In melanoma, incidence rates are higher in women than in men among individuals less than 40 years of age, but among those older than 50 years of age, melanoma is more frequent in men than in women. To investigate this difference, we examined the association among MDM2 SNP309, age at diagnosis, and gender among melanoma patients. EXPERIMENTAL DESIGN: Prospectively enrolled melanoma patients (N = 227) were evaluated for MDM2 SNP309 and the related polymorphism, p53 Arg72Pro. DNA was isolated from patient blood samples, and genotypes were analyzed by PCR-restriction fragment length polymorphism. Associations among MDM2 SNP309, p53 Arg72Pro, age at diagnosis, and clinicopathologic features of melanoma were analyzed. RESULTS: The median age at diagnosis was 13 years earlier among women with a SNP309 GG genotype (46 years) compared with women with TG+TT genotypes (59 years; P = 0.19). Analyses using age dichotomized at each decade indicated that women with a GG genotype had significantly higher risks of being diagnosed with melanoma at ages <50 years compared with women >or=50 years, but not when the comparison was made between women <60 and >or=60 years. At ages <50 years, women with a GG genotype had a 3.89 times greater chance of being diagnosed compared with women with TG+TT genotypes (P = 0.01). Similar observations were not seen among men. CONCLUSIONS: Our data suggest that MDM2 may play an important role in the development of melanoma in women. The MDM2 SNP309 genotype may help identify women at risk of developing melanoma at a young age
— id: J0180616, year: 2009, vol: 15, page: 2573, stat: Journal Article,

Cole disease: guttate hypopigmentation and punctate palmoplantar keratoderma [letter]
Moore, Megan M; Orlow, Seth J; Kamino, Hideko; Wang, Nadia; Schaffer, Julie V
2009 Apr;145(4):495-7, Archives of dermatology
— id: J0185935, year: 2009, vol: 145, page: 495, stat: Journal Article,

Traumatic neuromas of the penis: a clinical, histopathological and immunohistochemical study of 17 cases
Salcedo, Eduardo; Soldano, Anthony C; Chen, Lesley; Rokhsar, Cameron K; Tam, Sam T; Meehan, Shane A; Kamino, Hideko
2009 Feb;36(2):229-33, Journal of cutaneous pathology
We present 17 penile traumatic neuromas. The mean patient age at presentation was 38 years (range 23-59 years). The most common site involved was the penile shaft. The lesions ranged from 1 to 7 mm in greatest dimension. The clinical diagnosis in all cases included condyloma acuminatum. In all cases, a history of trauma because of prior biopsy and/or circumcision was found. Histologically, all lesions showed similar features consisting of an increased number of dermal nerve bundles embedded within a fibrous stroma. Often, single or multiple Meissner corpuscle-like structures were noted

in the papillary dermis. Our study suggests that circumcision or other forms of trauma to the skin of the penis likely plays an important role in the pathogenesis and clinical presentation of this peculiar neural neoplasm. We call attention to this entity because it is often clinically misdiagnosed as condyloma acuminatum
— id: J0161790, year: 2009, vol: 36, page: 229, stat: Journal Article,

PERFORATING DISORDER WITH UNDERLYING CALCINOSIS CUTIS AFTER TOPICAL CALCIUM CHLORIDE EXPOSURE [Abstract]
Patel, R; Zirvi, M; Walters, R; Kamino, H
2009 JAN;36(1):147-147, Journal of cutaneous pathology
— id: J0156991, year: 2009, vol: 36, page: 147, stat: Journal Article,

Developing a multidisciplinary prospective melanoma biospecimen repository to advance translational research
Wich, Lindsay G; Hamilton, Heather K; Shapiro, Richard L; Pavlick, Anna; Berman, Russell S; Polsky, David; Goldberg, Judith D; Hernando, Eva; Manga, Prashiela; Krogsgaard, Michelle; Kamino, Hideko; Darvishian, Farbod; Lee, Peng; Orlow, Seth J; Ostrer, Harry; Bhardwaj, Nina; Osman, Iman
2009;1(1):35-43, American Journal of Translational Research
Several challenges face the development and operation of a biospecimen bank linked to clinical information, a critical component of any effective translational research program. Melanoma adds particular complexity and difficulty to such an endeavor considering the unique characteristics of this malignancy. We describe here a review of biospecimen bank and our experience in establishing a multi-disciplinary, prospective, integrated clinicopathological-biospecimen database in melanoma. The Interdisciplinary Melanoma Cooperative Group (IMCG), a prospective clinicopathological and biospecimen database, was established at the New York University (NYU) Langone Medical Center. With patients' informed consent, biospecimens from within and outside NYU, clinicopathological data, and follow-up information are collected using developed protocols. Information pertaining to biospecimens is recorded in 35 fields, and clinicopathological information is recorded in 371 fields within 5 modules in a virtual network system. Investigators conducting research utilizing the IMCG biospecimen resource are blind to clinicopathological information, and molecular data generated using biospecimens are linked independently with clinicopathological data by biostatistics investigators. This translational research enterprise acts as a valuable resource to efficiently translate laboratory discoveries to the clinic
— id: J0181904, year: 2009, vol: 1, page: 35, stat: Journal Article,

Inflammatory morphea in the context of Raynaud phenomenon
Abbasi, Naheed; Firoz, Bahar; Bossenbroek, Nicole M; Meehan, Shane A; Kamino, Hideko; Franks, Andrew G Jr
2008 Oct 15;14(10):11, Dermatology online journal
A 37-year-old woman presented with a one-year history of asymptomatic, red-brown patches and plaques on the abdomen and extremities, in the context of Raynaud phenomenon and anti-centromere antibodies. Two biopsy specimens confirmed the diagnosis of inflammatory morphea. Even in the absence of initial symptoms to support systemic disease, patients presenting with morphea in the setting of Raynaud phenomenon or anti-centromere antibodies deserve close surveillance for the possibility of CREST syndrome and systemic sclerosis
— id: J0161787, year: 2008, vol: 14, page: 11, stat: Journal Article,

Linear lichen planus
Batra, Priya; Wang, Nadia; Kamino, Hideko; Possick, Paul
2008 Oct 15;14(10):16, Dermatology online journal
A 50-year-old man presented with pruritic, hyperpigmented papules and plaques on the right lower extremity following Blaschko lines. A skin biopsy specimen was consistent with lichen planus (LP). Linear LP accounts for less than 0.2

percent of all patients with LP, and the segmental formation is thought to be due to a postzygotic mutation that affects one of the genes predisposing its development. This loss of heterozygosity may occur from a mutation, deletion, or DNA recombination and leads to the formation of a keratinocyte clone that is more susceptible to development of the skin disease. Histopathologically, linear LP is identical to LP, with the presence of hyperkeratosis, focal hypergranulosis, irregular acanthosis with a sawtooth appearance, vacuolar change of the basal-cell layer, and a dense band-like lymphocytic infiltrate at the dermal-epidermal junction. It is important to differentiate linear LP from lichen striatus, inflammatory linear verrucous epidermal nevus, linear psoriasis, and linear Darier-White disease, which have different presentations clinically and histopathologically
— id: J0162029, year: 2008, vol: 14, page: 16, stat: Journal Article,

Extragenital lichen sclerosus et atrophicus
Bergstrom, Kendra G; Mengden, Stephanie J; Kamino, Hideko; Ramsay, David
2008 May 15;14(5):23, Dermatology online journal
A 76-year-old woman with a history of eczematous dermatitis presented with a 9-month history of a pruritic, eczematous eruption of the trunk. This eruption responded to topical glucocorticoids but recurred on discontinuation of treatment on multiple occasions. A biopsy specimen showed extragenital lichen sclerosus et atrophicus. The diagnosis of extragenital lichen sclerosus is reviewed with a comparison to classic lichen sclerosus in terms of clinical features, histopathologic characteristics, and treatment approaches
— id: J0162039, year: 2008, vol: 14, page: 23, stat: Journal Article,

Epidermodysplasia verruciformis in the setting of HIV infection
Chen, Peter Jr; Kamino, Hideko; Walters, Ruth F; Rosenman, Karla; Pomeranz, Miriam K; Sanchez, Miguel
2008 Oct 15;14(10):1, Dermatology online journal
A 56-year-old man with human immunodeficiency virus infection presented with pink-to-hypopigmented, thin, flat-topped papules coalescent to plaques on the trunk and extremities for five years. The histopathologic findings were consistent with flat warts resembling epidermodysplasia verruciformis. Typically an inherited condition, this entity has also been observed in the setting of immunosuppression; the risk of developing non-melanoma skin cancers is of concern. Treatment options vary considerably, but often the lesions will recur upon cessation of therapy
— id: J0162036, year: 2008, vol: 14, page: 1, stat: Journal Article,

Subungual spitz nevus in a Hispanic infant
Dominguez-Cherit, Judith; Toussaint-Caire, Sonia; Kamino, Hideko; Iorizzo, Matilde; Tosti, Antonella
2008 Nov;34(11):1571-3, Dermatologic surgery
— id: J0162038, year: 2008, vol: 34, page: 1571, stat: Journal Article,

Erythema elevatum diutinum
Farley-Loftus, Rachel; Dadlani, Chicky; Wang, Nadia; Rosenman, Karla; Kamino, Hideko; Prystowsky, Stephen; Franks, Andrew G Jr; Pomeranz, Miriam K
2008 Oct 15;14(10):13, Dermatology online journal
A 64-year-old woman presented with a one-and-one-half year history of an enlarging, red-brown, firm plaque on the left thigh, with numerous, scattered, indurated, hyperpigmented patches on the lower extremities. Histopathologic examination of the largest plaque confirmed the diagnosis of erythema elevatum diutinum, which is a rare form of leukocytoclastic vasculitis that is associated with many disease entities, which include human immunodeficiency virus infection, malignant conditions, hematologic abnormalities, chronic infection, and autoimmune and connective-tissue disorders. The treatment of choice is dapsone; however, several other treatment modalities have been reported to be of

benefit
— id: J0162030, year: 2008, vol: 14, page: 13, stat: Journal Article,

Unilateral nevoid telangiectasia
Dadlani, Chicky; Kamino, Hideko; Walters, Ruth F; Rosenman, Karla; Pomeranz, Miriam K
2008 Oct 15;14(10):3, Dermatology online journal
A 30-year-old woman, who was six months pregnant, presented with multiple, blanching, asymptomatic telangiectasies on her right upper extremity for two years. At the onset of her pregnancy, her lesions increased in number and redness. Given the unilateral distribution and worsening during pregnancy, a diagnosis of unilateral nevoid telangiectasia was made. This condition is a rare entity that has been most commonly reported in association with puberty, pregnancy, the use of oral contraceptives, and alcoholic cirrhosis. However, there have been case reports in otherwise healthy individuals
— id: J0162034, year: 2008, vol: 14, page: 3, stat: Journal Article,

Polymorphisms of p53 and its negative regulator MDM2 in human melanoma [Abstract]
Firoz, EF; Warycha, M; Shapiro, R; Berman, R; Kamino, H; Darvishian, F; Rolnitzky, L; Goldberg, J; Osman, I; Polsky, D
2008 APR;128(5):S226-S226, Journal of investigative dermatology
— id: J0137576, year: 2008, vol: 128, page: S226, stat: Journal Article,

Nodular pretibial myxedema
Hunzeker, Christopher M; Kamino, Hideko; Walters, Ruth F; Kovich, Olympia I
2008 Oct 15;14(10):8, Dermatology online journal
A 30-year-old man with previously diagnosed and treated Graves disease presented for consultation regarding asymptomatic nodules over his anterior tibias. He was euthyroid at the time of presentation. The nodules arose symmetrically beneath the sites of pressure from his military boots. A biopsy specimen showed an accumulation of acid mucopolysaccharides consistent with pretibial myxedema. The patient had recently stopped smoking and chewing tobacco, which are known risk factors for the development of pretibial myxedema. Following diagnostic punch biopsies, the patient experienced a rapid resolution of the nodule on his right leg and a appreciable reduction in size of the nodule on the left leg. Three months later, the nodules are beginning to enlarge once again
— id: J0161182, year: 2008, vol: 14, page: 8, stat: Journal Article,

Trichoepithelioma
Johnson, Hillary; Robles, Mirin; Kamino, Hideko; Walters, Ruth F; Lee, Arnold; Sanchez, Miguel
2008 Oct 15;14(10):5, Dermatology online journal
A 29-year-old man presented with a long-standing history of asymptomatic, skin-colored, facial papules and nodules. Histopathologic examination of a representative papule demonstrated trichoepithelioma. The patient had a history of a brother with a similar phenotype, which suggests a diagnosis of familial trichoepithelioma. Linkage and mutational analyses support genetic heterogeneity of familial trichoepithelioma, possibly sharing a clinical spectrum with Brooke-Spiegler syndrome and familial cylindromatosis since each entity has been associated with mutations the CYLD gene
— id: J0162032, year: 2008, vol: 14, page: 5, stat: Journal Article,

Elastin immunostain distinguishes the elastic fiber network in malignant melanomas with regression from melanomas with scarring fibrosis [Abstract]
Kamino, H; Tam, S; Toussaint, S
2008 JAN;88(2):95A-95A, Laboratory investigation
— id: J0133611, year: 2008, vol: 88, page: 95A, stat: Journal Article,

Elastin immunostain distinguishes the elastic fiber network in malignant melanomas with regression from melanomas with scarring fibrosis [Abstract]

Kamino, H; Tam, S; Toussaint, S

2008 JAN;21(2):95A-95A, Modern pathology

— id: J0133585, year: 2008, vol: 21, page: 95A, stat: Journal Article,

FoxP3+CD4+T regulatory cells and survival in melanoma [Abstract]

Kamino, H; Walters, R; Tam, S; Ratech, H

2008 JAN;88(2):96A-96A, Laboratory investigation

— id: J0133612, year: 2008, vol: 88, page: 96A, stat: Journal Article,

FoxP3+CD4+T regulatory cells and survival in melanoma [Abstract]

Kamino, H; Walters, R; Tam, S; Ratech, H

2008 JAN;21(2):96A-96A, Modern pathology

— id: J0133586, year: 2008, vol: 21, page: 96A, stat: Journal Article,

Generalized essential telangiectasia

Karen, Julie K; Mengden, Stephanie J; Kamino, Hideko; Shupack, Jerome L

2008 May 15;14(5):9, Dermatology online journal

A 56-year-old woman presented with multiple, erythematous cutaneous vessels that blanched with diascopy and were symmetrically distributed over both lower and upper extremities. The lesions had been present for approximately 6 years and were asymptomatic. Generalized essential telangiectasia (GET) is an idiopathic syndrome of widespread, asymptomatic telangiectases of unknown cause. In our patient, an extensive laboratory evaluation showed low levels of circulating vitamin C as well as the presence of urinary matrix metalloproteinases. The relevance of these abnormal findings is unclear. No uniformly effective treatment exists for GET. Our patient was started on oral doxycycline and was referred for laser therapy

— id: J0160960, year: 2008, vol: 14, page: 9, stat: Journal Article,

Lichen planopilaris and psoriasis

Lane, Tameka K; Kamino, Hideko; Walters, Ruth F; Meehan, Shane; Pomeranz, Miriam K

2008 Oct 15;14(10):4, Dermatology online journal

A 34-year-old woman presented with large, scaly patches of alopecia with a peripheral rim of violaceous, folliculocentric papules and appreciable pruritus of one-year duration. Histopathologic examination showed changes consistent with lichen planopilaris and psoriasis, which was suggested by neutrophilic spongiosis. Consequently, cyclosporine and betamethasone valerate topical 0.12 percent foam twice daily were initiated. A short time after, there was clinical reduction of perifollicular erythema and attenuation of pruritus. However, there was no decrease of scale. Although LLP is classified in the lymphocytic group of cicatricial alopecias, this case demonstrates a clinical and histopathologic overlap with a psoriasiform dermatosis which may represent a collision of two diseases

— id: J0162033, year: 2008, vol: 14, page: 4, stat: Journal Article,

Traumatic penile neuromas clinicopathological correlation of 17 cases [Abstract]

Meehan, S; Soldano, A; Kamino, H

2008 JAN;35(1):146-146, Journal of cutaneous pathology

— id: J0150990, year: 2008, vol: 35, page: 146, stat: Journal Article,

Pretibial epidermolysis bullosa

Rizzo, Carina; Anandasabapathy, Niroshana; Walters, Ruth F; Rosenman, Karla; Kamino, Hideko; Prystowsky, Steven; Schaffer, Julie V

2008 Oct 15;14(10):26, Dermatology online journal

A 47-year-old Vietnamese woman presented with dystrophic fingernails and toenails that had been present since infancy. She also had developed, in the third decade, pretibial pruritus with vesicle formation and progressive localized papules and scars. Multiple family members were similarly affected. Physical examination showed lichenoid papules that coalesced into large plaques that were studded with milia over the pretibial areas and 20 nail dystrophy. A biopsy specimen showed milia-like structures and dermal fibrosis. Pretibial epidermolysis bullosa is a rare variant of dystrophic epidermolysis bullosa that shows appreciable clinical overlap with dystrophic epidermolysis bullosa pruginosa. Both disease subsets are characterized by the late age of onset, nail dystrophy, and predominantly pretibial pruritic lichenoid skin lesion; they are associated with glycine substitution mutations in COL7A1

— id: J0162028, year: 2008, vol: 14, page: 26, stat: Journal Article,

Tufted angioma

Schaffer, Julie V; Fangman, William; Bossenbroek, Nicole M; Meehan, Shane A; Kamino, Hideko

2008 Oct 15;14(10):20, Dermatology online journal

A 4-month-old girl developed coalescing, red-purple, firm plaques with irregular borders and superimposed papules in the left groin. The lesions were tender to palpation and they slowly expanded and became thicker over the next year. Histopathologic evaluation showed multiple, discrete lobules of tightly packed capillaries in a 'cannonball' pattern within the dermis, which confirmed the diagnosis of tufted angioma. The clinical and histopathologic features, natural history, and treatment options for tufted angiomas are reviewed; their relationship to kaposiform hemangioendotheliomas is discussed

— id: J0161786, year: 2008, vol: 14, page: 20, stat: Journal Article,

CD20 positive mycosis fungoides: a case report

Sen, Filiz; Kang, Steven; Cangiarella, Joan; Kamino, Hideko; Hymes, Kenneth

2008 Apr;35(4):398-403, Journal of cutaneous pathology

CD20 positive T-cell lymphoma is extremely rare. Most reported cases are nodal peripheral T-cell lymphomas (PTCLs) or rarely lymphoma involving extranodal sites. Only two cases of CD20 positive T-cell lymphomas involving the skin have been previously reported and were classified as PT

— id: J0135071, year: 2008, vol: 35, page: 398, stat: Journal Article,

Mastocytosis with urticaria pigmentosa and osteoporosis

Stein, Jennifer A; Kamino, Hideko; Walters, Ruth F; Pomeranz, Miriam K

2008 Oct 15;14(10):2, Dermatology online journal

A 76-year-old man with a 52-year history of urticaria pigmentosa was found to have an elevated serum tryptase level as well as osteoporosis. Histopathologic alterations of one his skin lesions showed an infiltrate of mast cells. Urticaria pigmentosa patients are at risk for osteoporosis because of elevated heparin and stem-cell factor levels. These patients should be screened with serum tryptase levels and bone density studies to detect osteoporosis, regardless of their age

— id: J0162035, year: 2008, vol: 14, page: 2, stat: Journal Article,

Mycobacterium marinum infection

Tran, Hien; Kamino, Hideko; Walters, Ruth F

2008 Oct 15;14(10):7, Dermatology online journal

A 64-year-old man presented for evaluation of tender pustules that developed on his right hand and subsequently spread

up his arms in a sporotrichoid manner. Owing to the prominent history of recent trauma followed by fish tank exposure, the patient was started on doxycycline for coverage of Mycobacterium marinum. Subsequent tissue culture grew M. marinum and confirmed the clinical diagnosis. M. marinum is an atypical mycobacteria that is ubiquitously found in aquatic environments. Owing to its optimal growth temperature of 25 to 35 degrees C, infections in humans are mostly restricted to the skin. Furthermore, the organism can spread by lymphatic drainage leading to the clinical appearance of sporotrichoid lesions. The preferred treatment for M. marinum is doxycycline, which was started in our patient and has subsequently improved his clinical condition
— id: J0162031, year: 2008, vol: 14, page: 7, stat: Journal Article,

Elastic fiber pattern in scleroderma/morphea [Abstract]
Walters, R; Pulitzer, M; Kamino, H
2008 JAN;35(1):131-131, Journal of cutaneous pathology
— id: J0150989, year: 2008, vol: 35, page: 131, stat: Journal Article,

Interstitial granulomatous dermatitis in a child with chronic uveitis [letter]
Warycha, Melanie A; Fangman, William; Kamino, Hideko; Schaffer, Julie V
2008 May;58(5 Suppl 1):S100-2, Journal of the American Academy of Dermatology
— id: J0162040, year: 2008, vol: 58, page: S100, stat: Journal Article,

Pigmented plexiform neurofibroma: Distinction from a large congenital melanocytic nevus
Schaffer, Julie V; Chang, Mary W; Kovich, Olympia I; Kamino, Hideko; Orlow, Seth J
2007 May;56(5):862-8, Journal of the American Academy of Dermatology
The substantial clinical and histologic overlap between neurotized congenital melanocytic nevi and the subset of plexiform neurofibromas with hyperpigmentation and hypertrichosis of the overlying skin (pigmented neurofibroma) has led to considerable confusion in the literature. A dark-brown, hypertrichotic plaque covered much of the right lower aspect of the trunk of a 1-year-old girl with a diffuse and plexiform neurofibroma in the same area, numerous cafe-au-lait macules, and intertriginous freckling. The latter findings were diagnostic of neurofibromatosis-1, which was further supported by the presence of unidentified bright objects on magnetic resonance imaging of the brain. Histologic examination of the hyperpigmented plaque revealed melanocytic hyperplasia at the dermoepidermal junction and a proliferation of rounded, pigmented melanocytes dispersed individually and in occasional small nests in the papillary dermis and scattered within underlying neurofibromatous tissue. Immunohistochemical staining with A103 (Melan-A/MART-1) and PNL2 confirmed the melanocytic differentiation of the pigmented cells, whereas glial fibrillary acidic protein and Leu-7 were detected only within plexiform areas and slender neuroid spindle cells. This case draws attention to the pigmented neurofibroma as a distinct clinicopathologic entity resulting from proliferation of melanocytes and neurosustentacular cells in the setting of neurofibromatosis-1
— id: J0161190, year: 2007, vol: 56, page: 862, stat: Journal Article,

Cutaneous metaplastic synovial cysts: A report of two cases [Abstract]
Mengden, S; Rosenman, K; Rueff, L; Kovich, O; Kamino, H
2007 JAN;34(1):132-132, Journal of cutaneous pathology
— id: J0124953, year: 2007, vol: 34, page: 132, stat: Journal Article,

"Pediatric blaschkitis": expanding the spectrum of childhood acquired Blaschko-linear dermatoses
Keegan, Brian R; Kamino, Hideko; Fangman, William; Shin, Helen T; Orlow, Seth J; Schaffer, Julie V
2007 Nov-Dec;24(6):621-7, Pediatric dermatology
We describe two young children who developed relapsing, pruritic, papulovesicular eruptions in multiple bands along Blaschko lines on the neck, trunk, and extremities. Skin specimens in both revealed spongiotic dermatitis. This

represents the first report of 'blaschkitis' in children, providing further evidence that lichen striatus and blaschkitis are related acquired Blaschko-linear dermatoses that exist on a spectrum rather than as the childhood and adult form of a single disease entity. We highlight the features that differentiate blaschkitis from lichen striatus, review the potential roles of cutaneous mosaicism, environmental triggers, and background immunologic state in their pathogenesis, and discuss the spectrum of inflammatory dermatoses that can follow Blaschko lines
— id: J0132738, year: 2007, vol: 24, page: 621, stat: Journal Article,

A modified approach to the histologic diagnosis of onychomycosis
Chang, Anwell; Wharton, Jacqueline; Tam, Sam; Kovich, Olympia I; Kamino, Hideko
2007 Nov;57(5):849-53, Journal of the American Academy of Dermatology
BACKGROUND: Histologic examination of nail clippings with periodic acid-Schiff staining is the most sensitive diagnostic test for onychomycosis; however, difficulties in processing nail plates limit its use. In onychomycosis, fungi are most concentrated in the subungual hyperkeratosis rather than in the nail plate. We hypothesized that the diagnosis of onychomycosis could be effectively made from histologic examination of subungual hyperkeratosis alone. Specimens of subungual hyperkeratosis, unlike nail plates, can be processed in the same routine manner as skin specimens, allowing for the diagnosis of onychomycosis to be made more quickly and at lower cost. OBJECTIVE: We investigated whether the diagnosis of onychomycosis could be effectively made from histologic examination of subungual hyperkeratosis alone. METHODS: We selected all nail specimens submitted during an 8-month period to the New York University Dermatopathology Section for evaluation of onychomycosis that had subungual hyperkeratosis associated with the nail plate. Nail specimens were divided into two components: a subungual hyperkeratosis component and a nail plate component. The subungual hyperkeratosis was processed separately in a routine fashion and embedded in paraffin and examined. We determined the percentage of cases of onychomycosis in which hyphae were present in the subungual component. RESULTS: Sixty-six cases of onychomycosis were diagnosed histologically during the study period. Ninety-seven percent of these cases had hyphae in the subungual component. In 3% of cases, hyphae were present in the nail plate component but not in the subungual component. LIMITATIONS: This modified approach to diagnosing onychomycosis can only be utilized when an adequate amount of subungual hyperkeratosis is submitted. CONCLUSIONS: The diagnosis of onychomycosis can be effectively made from histologic examination of subungual hyperkeratosis alone in most cases. This method circumvents the need to process nail plates in the vast majority of cases of onychomycosis (97%), resulting in a more efficient, less costly, and technically easier way of diagnosing onychomycosis. Submitting ample amounts of subungual hyperkeratosis is essential to increasing the diagnostic yield of nail clippings
— id: J0131001, year: 2007, vol: 57, page: 849, stat: Journal Article,

Large cell transformation of mycosis fungoides in lymph nodes: A clinicopathologic study by flow cytometry and fine needle aspiration biopsy [Abstract]
Wen, H; Cangiarella, J; Kamino, H; Hymes, K; Sen, F
2006 SEP;19(5):119-120, Modern pathology
— id: J0122455, year: 2006, vol: 19, page: 119, stat: Journal Article,

Primary mucinous carcinoma with direct histopathologic evidence of lymphatic invasion
Warycha, Melanie; Kamino, Hideko; Mobini, Narciss; Hale, Elizabeth K
2006 Jul-Aug;5(7):655-8, Journal of drugs in dermatology : JDD
BACKGROUND: Primary mucinous carcinoma of the skin is a rare sweat gland neoplasm which occurs most commonly in the periorbital region. Although the tumor has a propensity for local recurrence and regional spread, distant metastases are rare. The standard treatment of primary mucinous carcinoma is wide local excision. Mohs micrographic surgery may also be utilized in cases where tissue conservation is of utmost concern. OBJECTIVE: We present a case of

primary mucinous carcinoma arising in the scalp, which was treated with wide local excision. METHODS: A case report and literature review are presented. RESULTS: Histopathologic evaluation revealed a well-circumscribed neoplasm characterized by lobules and aggregates of epithelial cells embedded in abundant pools of mucin. In addition, small aggregates of neoplastic cells were found at a distance from the primary nodule, indicative of lymphatic invasion. CONCLUSION: Primary mucinous carcinoma has a high propensity for locoregional metastases and recurrence. To our knowledge, this is the first report demonstrating direct histopathologic evidence of lymphatic invasion which correlates with this tumor's biologic behavior
— id: J0121733, year: 2006, vol: 5, page: 655, stat: Journal Article,

Mutations in the desmoglein 4 gene underlie localized autosomal recessive hypotrichosis with monilethrix hairs and congenital scalp erosions
Schaffer, Julie V; Bazzi, Hisham; Vitebsky, Anna; Witkiewicz, Agnieszka; Kovich, Olympia I; Kamino, Hideko; Shapiro, Lawrence S; Amin, Snehal P; Orlow, Seth J; Christiano, Angela M
2006 Jun;126(6):1286-91, Journal of investigative dermatology
Localized autosomal recessive hypotrichosis (LAH) is a recently defined disorder characterized by fragile, short, sparse hairs on the scalp, trunk, and extremities. Mutations in desmoglein 4 (DSG4), a novel member of the desmosomal cadherin family that is expressed in the hair follicle as well as the suprabasal epidermis, have been found to underlie LAH. Thus far, the allelic series includes a recurrent intragenic deletion identified in affected Pakastani kindreds and a missense mutation detected in an Iraqi family. We report three siblings of Iraqi and Iranian origin with LAH that presented with congenital scalp erosions and monilethrix-like hairs, features that have not been previously described in this disorder. Follicular hyperkeratotic papules and marked pruritus were also prominent clinical findings. Novel compound heterozygous DSG4 mutations, including a splice-site mutation and a missense mutation that disrupts a conserved calcium-binding site in the extracellular (EC)2-EC3 interface, were found to underlie the disease in this family. These observations broaden the phenotypic and genotypic spectrum of LAH, further illustrating the consequences of DSG4 dysfunction on epidermal and hair shaft integrity
— id: J0115625, year: 2006, vol: 126, page: 1286, stat: Journal Article,

Mucocutaneous neuromas: an underrecognized manifestation of PTEN hamartoma-tumor syndrome
Schaffer, Julie V; Kamino, Hideko; Witkiewicz, Agnieszka; McNiff, Jennifer M; Orlow, Seth J
2006 May;142(5):625-32, Archives of dermatology
BACKGROUND: The spectrum of clinical findings associated with PTEN tumor suppressor gene germline mutations, referred to as PTEN hamartoma-tumor syndrome (PHTS), includes Cowden and Bannayan-Riley-Ruvalcaba syndromes. Although the skin is the ectodermal structure most often affected by these autosomal dominant genodermatoses, abnormalities of neural tissues are frequently observed. OBSERVATIONS: We describe a 5-year-old boy with macrocephaly, prominent corneal nerves, and progressive development of multiple painful, dome-shaped, translucent pink to skin-colored papules on the vermilion portion of the upper lip, fingers, palms, and shins. Histologic evaluation demonstrated dermal proliferation of well-demarcated nerve bundles associated with abundant mucin and surrounded by a distinct perineural sheath, findings diagnostic of a nonencapsulated neuroma. Genetic analysis revealed a novel heterozygous germline nonsense mutation in PTEN, predicted to result in a truncated PTEN protein. To our knowledge, this represents the first report of multiple neuromas as the sole mucocutaneous manifestation of PHTS. CONCLUSIONS: This article highlights neuromas as a cutaneous sign of PHTS, drawing attention to manifestations of PHTS in neural tissues of the skin, eye, gastrointestinal tract, and brain. Along with multiple endocrine neoplasia type 2B, PHTS should be considered in the differential diagnosis of multiple mucocutaneous neuromas, particularly those involving extrafacial sites
— id: J0114945, year: 2006, vol: 142, page: 625, stat: Journal Article,

Histologic findings in early cutaneous T-cell lymphoma correlate with T-cell clonality [Abstract]

Day, CE; Du, J; Qian, H; Xue, X; Kamino, H; Ratech, H

2006 JAN;19(4):221A-222A, Modern pathology

— id: J0110556, year: 2006, vol: 19, page: 221A, stat: Journal Article,

Histologic findings in early cutaneous T-cell lymphoma correlate with T-cell clonality [Abstract]

Day, CE; Du, J; Qian, H; Xue, X; Kamino, H; Ratech, H

2006 JAN;86(4):221A-222A, Laboratory investigation

— id: J0112170, year: 2006, vol: 86, page: 221A, stat: Journal Article,

Rapid detection of clonal T-cell receptor-beta gene rearrangements in T-Cell lymphomas using the LightCycler-polymerase chain reaction with DNA melting curve analysis

Yang, Xiao Yan; Xu, Dongsheng; Du, Juan; Kamino, Hideko; Rakeman, Jennifer; Ratech, Howard

2005 Feb;7(1):81-8, Journal of molecular diagnostics

Various molecular methods have been developed to diagnose clonal T-cell receptor (TCR) gene rearrangements in clinical samples. Most polymerase chain reaction strategies for detecting clonal TCR gene rearrangements rely on either gel or capillary electrophoresis. However, a cumbersome manual transfer step separates amplification from analysis. Recently, we developed a novel polymerase chain reaction assay using the LightCycler system to detect clonal immunoglobulin heavy chain gene rearrangement. In the current study, we extend this work to include the TCR. We report that clonal TCR-beta (TCR-beta) gene rearrangements can be detected in less than 1 hour after preparing the DNA by measuring DNA melting immediately after amplification in a single closed capillary tube. We retrospectively studied 52 fresh-frozen tissue samples from patients clinically suspected of T-cell malignancy. A clonal TCR-beta gene rearrangement was detected in 14 samples by DNA melting curve analysis. When DNA melting was compared to the gold standard methods of Southern blot or denaturing gradient gel electrophoresis, it achieved a sensitivity equal to 71% and a specificity equal to 94%. We also compared melting curve analysis and polyacrylamide gel electrophoresis: melting curve analysis reached a sensitivity equal to 100% and a specificity equal to 97%. We conclude that DNA melting curve analysis in the LightCycler system has potential for clinical use as a new, ultra-fast method for the initial diagnosis of clonal TCR-beta gene rearrangements

— id: J0185936, year: 2005, vol: 7, page: 81, stat: Journal Article,

Possible role of the bulge region in the pathogenesis of inflammatory scarring alopecia: lichen planopilaris as the prototype

Mobini, Narciss; Tam, Sam; Kamino, Hideko

2005 Nov;32(10):675-9, Journal of cutaneous pathology

BACKGROUND: Lichen planopilaris (LPP) is the prototype of scarring alopecias that mainly target the infundibuloisthmic (bulge) region of hair follicle. Hair follicle stem cells have been shown to reside in the bulge. METHODS: We carried out this study to better define the possible pathogenetic role of the bulge in LPP. Thirty-five cases of LPP were studied. Multiple serial sections of biopsy specimens stained with hematoxylin and eosin, periodic acid Schiff-diastase, and Elastic van Gieson. The following immunostains were applied: CD3, CD4, CD8, CD1a, and Ki-67. Uninvolved follicles and normal scalp biopsy specimens served as normal controls. RESULTS: All cases showed a lichenoid lymphocytic infiltrate at the bulge region. The bulb area was spared. CD8(+) T cells were increased compared with CD4(+) T-cell population. Langerhans' cells were decreased. Proliferating stem cells, highlighted by Ki-67, showed a marked decrease in the bulge compared with uninvolved follicles. CONCLUSION: Our study supports the finding that in LPP, the inflammatory infiltrate mainly involves the bulge region, where the stem cells reside. Once this area is damaged, the hair loses its potential of regrowth with resulting scarring alopecia. This is in contrast with inflammatory

non-scarring alopecias such as alopecia areata, where the bulb region is targeted, sparing the stem cells
— id: J0110104, year: 2005, vol: 32, page: 675, stat: Journal Article,

Cylindroma (dermal analog tumor) of the breast: a comparison with cylindroma of the skin and adenoid cystic carcinoma of the breast
Albores-Saavedra, Jorge; Heard, Steven Cooper; McLaren, Bernadette; Kamino, Hideko; Witkiewicz, Agnieszka K
2005 Jun;123(6):866-73, American journal of clinical pathology
— id: J0103230, year: 2005, vol: 123, page: 866, stat: Journal Article,

Rapid Diagnosis of Clonal Immunoglobulin Heavy Chain Gene Rearrangements in Cutaneous B-Cell Lymphomas Using the LightCycler-Polymerase Chain Reaction with DNA Melting Curve Analysis
Xu, Dongsheng; Du, Juan; Kamino, Hideko; Ratech, Howard
2004 Oct;26(5):385-389, American journal of dermatopathology
We have recently developed a novel Immunoglobulin heavy chain gene rearrangement (IgH-R) assay that combines polymerase chain reaction (PCR) amplification and analysis in the same closed capillary tube using the LightCycler System. IgH-R can be identified by DNA melting curve analysis within 40 minutes after DNA preparation and amplification. To test the clinical utility of this new IgH-R assay for rapidly diagnosing cutaneous B-cell lymphomas, we prospectively analyzed 44 formalin-fixed, paraffin-embedded tissues suspected of B-cell malignant lymphoma: skin (n = 31), lymph node (n = 7), stomach (n = 3), spleen (n = 1), colon (n = 1), and soft tissue (n = 1). We detected IgH-R in 12 DNA samples, including 8 skin biopsies, with the following diagnoses: B-cell chronic lymphocytic leukemia (n = 4), extranodal marginal zone B-cell lymphoma (n = 4), diffuse large B-cell lymphoma (n = 2), Burkitt lymphoma (n = 1), and precursor B-lymphoblastic lymphoma (n = 1). DNA melting curve analysis, compared with polyacrylamide gel electrophoresis, achieved a sensitivity equal to 92.3% and a specificity equal to 100%. There was a single false negative result because DNA melting curve analysis could not detect less than 10.0% clonal B-cells. We conclude that this new, rapid PCR assay for detecting IgH-R based on DNA melting curve analysis can be clinically useful for confirming the initial diagnosis of B-cell malignant lymphoma
— id: J0069779, year: 2004, vol: 26, page: 385, stat: Journal Article,

Infantile granular parakeratosis: recognition of two clinical patterns
Chang, Mary Wu; Kaufmann, Julie M; Orlow, Seth J; Cohen, David E; Mobini, Narciss; Kamino, Hideko
2004 May;50(5 Suppl):S93-6, Journal of the American Academy of Dermatology
Granular parakeratosis is an acquired, idiopathic disorder of keratinization typified by retention hyperkeratosis. It usually occurs in women at intertriginous sites. There have been only 2 reports of infants with granular parakeratosis to our knowledge. We describe 3 additional infants with granular parakeratosis. We demonstrate that infantile granular parakeratosis exhibits 2 clinical patterns: bilateral linear plaques in the inguinal folds; and erythematous geometric plaques underlying pressure points from the diaper. A thick, flakelike scale is present in both forms and is characteristic. Diaper wearing appears to play an important role in the genesis of infantile granular parakeratosis but the mechanisms are unclear. Therapeutic responsiveness to topical agents is ambiguous, however, spontaneous clearance after months to 1 year appears to be the rule
— id: J0069780, year: 2004, vol: 50, page: S93, stat: Journal Article,

Toxic epidermal necrolysis-like reaction secondary to colchicine overdose
Arroyo, M P; Sanders, S; Yee, H; Schwartz, D; Kamino, H; Strober, B E
2004 Mar;150(3):581-8, British journal of dermatology
Colchicine is a microtubule-inhibiting drug used to treat gout, familial Mediterranean fever and many other skin diseases. Intoxication with colchicine affects multiple organs, often fatally. Cutaneous sequelae of colchicine toxicity are

rare. We describe the clinical and histological features of a toxic epidermal necrolysis-like exanthem in a patient who lethally overdosed on colchicine
— id: J0067523, year: 2004, vol: 150, page: 581, stat: Journal Article,

Solitary hemorrhagic nodule on the great toe
Kotcher, Lauren; Kimyai-Asadi, Arash; Kamino, Hideko; Began, Dina
2003 Nov;139(11):1497-502, Archives of dermatology
— id: J0067215, year: 2003, vol: 139, page: 1497, stat: Journal Article,

A 63-year-old man with chronic penile ulcers
Kimyai-Asadi, Arash; Jih, Ming H; Began, Dina M; Mully, Thaddeus W; Shupack, Jerome L; Kamino, Hideko
2003 Dec;139(12):1647-52, Archives of dermatology
— id: J0069540, year: 2003, vol: 139, page: 1647, stat: Journal Article,

Congenital primary cutaneous rhabdomyosarcoma in a neonate
Brecher, Alexandra R; Reyes-Mugica, Miguel; Kamino, Hideko; Chang, Mary Wu
2003 Jul-Aug;20(4):335-8, Pediatric dermatology
We report a case of congenital primary cutaneous rhabdomyosarcoma, solid alveolar type, presenting as a solitary skin lesion on the right upper lip of a 2-week-old infant boy. Rhabdomyosarcoma originates from the embryonic mesenchyme precursor of striated muscle. Histologically it belongs to the group of 'small round cell tumors.' Its myogenic origin is ascertained by immunohistochemical studies positive for myogenin, muscle-specific actin, desmin, and myoglobin. Malignancy in the neonatal period is uncommon and the clinical management presents considerable challenges. Congenital alveolar rhabdomyosarcoma is a highly malignant tumor with no record of long-term survivors. Treatment options include chemotherapy, excision, and radiotherapy. This infant's tumor was responsive to chemotherapy and surgery and he was free of disease at the 6-month follow-up
— id: J0053163, year: 2003, vol: 20, page: 335, stat: Journal Article,

Tumid lupus erythematosus: criteria for classification with immunohistochemical analysis
Alexiades-Armenakas, Macrene R; Baldassano, Marisa; Bince, Benji; Werth, Victoria; Bystryn, Jean-Claude; Kamino, Hideko; Soter, Nicholas A; Franks, Andrew G Jr
2003 Aug 15;49(4):494-500, Arthritis & rheumatism
OBJECTIVE: To define comprehensive criteria for the classification and differential diagnosis of tumid lupus erythematosus (LE). METHODS: A prospective study of patients fulfilling the classical description of tumid LE was performed. Clinical evaluation, histopathologic and direct immunofluorescence analyses of skin specimens, and serologic evaluation were conducted. The inflammatory cell infiltrate was quantitatively investigated by immunohistochemical analysis of fresh frozen skin specimens using multiple lymphocytic markers. RESULTS: Fifteen patients were followed for a mean of 7 years. Smooth, indurated, nonscarring, pink to violaceous papules, plaques, or nodules, devoid of surface changes were distributed on sun exposed sites. The mean lesion duration was 2 years, female:male ratio was 8:7, and racial distribution was 11 white, 2 Hispanic, and 2 African American patients. Histopathologic findings included a superficial and deep, perivascular, and frequently periadnexal infiltrate of lymphocytes, mucin deposition throughout the dermis, and absent to focal dermal-epidermal junctional involvement. Direct immunofluorescence immunoreactants and low titer antinuclear antibodies were variably present. Immunohistochemical findings included a predominance of pan-T cell marker CD3-expressing (78.0% +/- 6.3%) T lymphocytes. Most were CD4 expressing (82.7% +/- 8.0%) helper T cells; a minority were CD8 expressing (31.3% +/- 14.0%) cytotoxic T cells. The CD4:CD8 ratio was 3.1 (+/-1.3):1. One patient developed systemic LE and one a discoid LE lesion. CONCLUSION: Comprehensive clinical, histopathologic, and immunohistochemical criteria for the

classification of tumid LE are proposed that differentiate tumid LE from other cutaneous disorders that may be clinically and histologically indistinguishable. The chronic, benign course indicates that tumid LE be classified as a form of chronic cutaneous LE, although it may be a cutaneous feature of systemic LE
— id: J0053132, year: 2003, vol: 49, page: 494, stat: Journal Article,

Distinctive patterns of elastic fibers in melanocytic nevi and malignant melanoma. A histochemical and immunohistochemical study [abstract]
Kamino, H; Toussaint, S; Tam, S T; Tapia, B
2000;80(Suppl 1):63A-63A, Laboratory investigation
— id: J0016835, year: 2000, vol: 80, page: 63A, stat: Journal Article,

Er:YAG laser for the treatment of actinic keratoses
Jiang SB; Levine VJ; Nehal KS; Baldassano M; Kamino H; Ashinoff RA
2000 May;26(5):437-40, Dermatologic surgery
BACKGROUND: There is no single optimal treatment for multiple facial actinic keratoses. The existing therapies such as topical 5-fluorouracil, chemical peels, cryotherapy, dermabrasion, and CO2 laser resurfacing can produce prolonged recovery time or are often operator dependent. OBJECTIVE: The purpose of this study was to investigate another therapeutic modality which provides a shorter recovery time with uniform results. We performed a prospective pilot study investigating the use of the Er:YAG laser for the treatment of multiple facial actinic keratoses. METHODS: Five patients with multiple facial actinic keratoses were treated with two to three passes of Er:YAG laser. Anesthesia was achieved in all cases by topical application and local infiltration when indicated. All patients were treated with 2.0 J, 5 mm spot size, and a fluence of 10 J/cm2. Clinical and histologic evaluations were performed both pre- and postoperatively. RESULTS: All patients showed a decrease in the total number of clinical actinic keratoses on the face ranging from 86 to 96%. In addition to the reversal of actinic damage in the epidermis, histologic evidence revealed increased fibroplasia and decreased superficial solar elastosis 3 months after the laser resurfacing. Reepithelialization occurred in 5-8 days, and erythema lasted for about 3-6 weeks after the procedure. There was no evidence of scarring or pigmentary changes in any of the patients during the follow-up period. CONCLUSION: Er:YAG laser skin resurfacing is a safe and effective treatment for multiple facial actinic keratoses. Histologic data suggest a new zone of collagen deposition occurs in the superficial papillary dermis. Under our current parameters, Er:YAG laser skin resurfacing has a relatively short recovery period and a low risk of scarring. Unlike the CO2 laser, Er:YAG laser skin resurfacing can be performed with topical anesthesia alone
— id: J0008953, year: 2000, vol: 26, page: 437, stat: Journal Article,

Precision of automatic measurements of pigmented skin lesion parameters with a MelaFind(TM) multispectral digital dermoscope
Gutkowicz-Krusin D; Elbaum M; Jacobs A; Keem S; Kopf AW; Kamino H; Wang S; Rubin P; Rabinovitz H; Oliviero M
2000 Dec;10(6):563-70., Melanoma research
The purpose of this study was to assess the precision of automatic computerized measurement of parameters that may be useful in the differentiation of malignant melanoma from benign pigmented skin lesions, and also to determine the feasibility of quantitative monitoring of skin lesions over time. Ten independent sequences of images were acquired with a MelaFind multispectral digital dermoscope for each of 12 benign or malignant pigmented skin lesions. The sequences of images were processed automatically to provide 10 independent measurements of the various parameters for each lesion. Parameters included lesion area, greatest 'diameter', perimeter, reflectance and asymmetry. The precision of each parameter determination was computed from the mean and standard deviation of the 10 measurements of that parameter. The relative errors in determining the lesion area, 'diameter' and perimeter were found to be 6%, 3% and 4%, respectively. Other lesion parameters that are used in differentiating melanomas from benign skin lesions were also

analysed as a function of wavelength. In the blue band (about 430 nm) the relative error was about 7% for the mean lesion reflectance and about 7% for the asymmetry parameter. These results demonstrate the feasibility of using MelaFind for objective quantitative monitoring of changes in pigmented skin lesions over time. As suggested by some studies, such information is useful in the early detection of malignant melanoma. The results show that parameters obtained automatically from MelaFind images are sufficiently precise to allow pertinent parameters to be used to classify pigmented skin lesions
— id: J0018183, year: 2000, vol: 10, page: 563, stat: Journal Article,

Congenital self-healing reticulohistiocytosis with eye involvement
Zaenglein AL; Steele MA; Kamino H; Chang MW
2001 Mar-Apr;18(2):135-7, Pediatric dermatology
Congenital self-healing reticulohistiocytosis (CSHR) represents the benign end of the spectrum of Langerhans cell histiocytoses, with spontaneous resolution of lesions within the first year of life. However, involvement of organ systems other than the skin has been described occasionally and recurrence of disease at sites distant from the skin has been documented. We report a case of CSHR with eye involvement that spontaneously resolved concurrent with resolution of skin lesions. Because multiple organ systems can be involved and recurrences are possible, long-term follow-up of these patients is indicated
— id: J0022576, year: 2001, vol: 18, page: 135, stat: Journal Article,

Automatic differentiation of melanoma from melanocytic nevi with multispectral digital dermoscopy: A feasibility study
Elbaum M; Kopf AW; Rabinovitz HS; Langley RG; Kamino H; Mihm MC; Sober AJ; Peck GL; Bogdan A; Gutkowicz-Krusin D; Greenebaum M; Keem S; Oliviero M; Wang S
2001 Feb;44(2):207-218., Journal of the American Academy of Dermatology
BACKGROUND: Differentiation of melanoma from melanocytic nevi is difficult even for skin cancer specialists. This motivates interest in computer-assisted analysis of lesion images. OBJECTIVE: Our purpose was to offer fully automatic differentiation of melanoma from dysplastic and other melanocytic nevi through multispectral digital dermoscopy. METHOD: At 4 clinical centers, images were taken of pigmented lesions suspected of being melanoma before biopsy. Ten gray-level (MelaFind) images of each lesion were acquired, each in a different portion of the visible and near-infrared spectrum. The images of 63 melanomas (33 invasive, 30 in situ) and 183 melanocytic nevi (of which 111 were dysplastic) were processed automatically through a computer expert system to separate melanomas from nevi. The expert system used either a linear or a nonlinear classifier. The 'gold standard' for training and testing these classifiers was concordant diagnosis by two dermatopathologists. RESULTS: On resubstitution, 100% sensitivity was achieved at 85% specificity with a 13-parameter linear classifier and 100%/73% with a 12-parameter nonlinear classifier. Under leave-one-out cross-validation, the linear classifier gave 100%/84% (sensitivity/specificity), whereas the nonlinear classifier gave 95%/68%. Infrared image features were significant, as were features based on wavelet analysis. CONCLUSION: Automatic differentiation of invasive and in situ melanomas from melanocytic nevi is feasible, through multispectral digital dermoscopy
— id: J0018184, year: 2001, vol: 44, page: 207, stat: Journal Article,

Immunologic, molecular and clinical characterization of borderline CD30+cutaneous proliferations [Abstract]
Baldassano, M; Ramsay, D; Magidson, J; Kamino, H; Inghirami, G; Tiesinga, J
2001;14(Suppl 1):65A-65A, Modern pathology
— id: J0100200, year: 2001, vol: 14, page: 65A, stat: Journal Article,

Immunologic, molecular and clinical characterization of borderline CD30+cutaneous proliferations [Abstract]
Baldassano, M; Ramsay, D; Magidson, J; Kamino, H; Inghirami, G; Tiesinga, J
2001;81(Suppl 1):65A-65A, Laboratory investigation
— id: J0100250, year: 2001, vol: 81, page: 65A, stat: Journal Article,

Epidermal nevi
Baldassano M; Kamino H
Current dermatologic diagnosis & treatment Philadelphia : Lippincott Williams & Wilkins, 2001,
— id: C0001531, year: 2001, vol: , page: 54, stat: Chapter,

Congenital Spitz nevus clinically mimicking melanoma
Zaenglein, Andrea L; Heintz, Patrick; Kamino, Hideko; Zisblatt, Martin; Orlow, Seth J
2002 Sep;47(3):441-4, Journal of the American Academy of Dermatology
The differentiation between atypical variants of Spitz nevus and melanoma is often difficult given the many clinical and histopathologic similarities between the two. We report a case of an infant with a congenital scalp lesion exhibiting clinical features of melanoma, including variegation and regression of pigmentation and a rapidly changing appearance. Histologic examination of the excised lesion revealed a benign congenital Spitz nevus. This case emphasizes the need for clinical and histologic correlation in determining the benign or malignant nature of atypical pigmented lesions in infants
— id: J0047966, year: 2002, vol: 47, page: 441, stat: Journal Article,

HDM2 protein overexpression and prognosis in primary malignant melanoma
Polsky, David; Melzer, Kate; Hazan, Carole; Panageas, Katherine S; Busam, Klaus; Drobnjak, Maria; Kamino, Hideko; Spira, Joanna G; Kopf, Alfred W; Houghton, Alan; Cordon-Cardo, Carlos; Osman, Iman
2002 Dec 4;94(23):1803-6, Journal of the National Cancer Institute
Overexpression of the oncogene HDM2 is observed in a substantial proportion of melanomas, including noninvasive and thin lesions, suggesting that HDM2 overexpression may be an early event in melanocyte transformation. To determine the role of HDM2 in the clinical progression of melanoma, we examined whether its expression was associated with patient survival. From November 1972 through November 1982, 134 patients with melanoma who participated in the New York University Melanoma Cooperative Group were studied, if representative tissues and follow-up were available. HDM2 protein expression was assessed immunohistochemically. Unexpectedly, we observed that HDM2 overexpression was statistically significantly associated with improved disease-free survival (relative risk [RR] = 0.47, 95% confidence interval [CI] = 0.24 to 0.89; two-sided chi(2) P =.021) and overall survival (RR = 0.55, 95% CI = 0.33 to 0.94; two-sided chi(2) P =.027) in multivariable analysis. HDM2 overexpression appears to be an independent predictor of survival for patients with primary melanoma; however, larger prospective studies are required for validation
— id: J0053426, year: 2002, vol: 94, page: 1803, stat: Journal Article,

Evaluation of the proliferation marker MIB-1 in the prognosis of cutaneous malignant melanoma
Hazan, Carole; Melzer, Kate; Panageas, Katherine S; Li, Eric; Kamino, Hideko; Kopf, Alfred; Cordon-Cardo, Carlos; Osman, Iman; Polsky, David
2002 Aug 1;95(3):634-40, Cancer
BACKGROUND: The proliferation marker MIB-1, which recognizes the Ki-67 antigen, provides independent prognostic information in several tumor types. Its utility in melanoma has been evaluated mostly in studies of thick primary tumors. Its usefulness in thinner lesions has not been assessed adequately. METHODS: A well characterized cohort of 137 patients diagnosed with primary cutaneous melanoma at the New York University School of Medicine between 1972 and 1982 was studied based on the availability of representative tissues and adequate clinical follow-up. Twenty-one tumors were less than or equal to 1.0 mm thick, 94 were between 1.01 and 4.0 mm thick, and 22 were

thicker than 4.0 mm. Tumor cell proliferation was assessed by immunohistochemistry using the monoclonal antibody MIB-1. MIB-1 expression was correlated with baseline clinicopathologic parameters, as well as recurrence (RR), disease-free (DFS), and overall survival (OS) rates. Median follow-up among survivors was 6.5 years (range, 5.6-17.5). RESULTS: High proliferative index, defined as 20% or more of tumor cells showing nuclear immunoreactivity, was observed in 65 of 137 (47.4%) cases. High proliferative index was significantly correlated with increased tumor thickness ($P < 0.001$) and higher stage ($P = 0.03$). Trends approaching statistical significance were observed with ulceration of the primary tumor ($P = 0.09$), male gender ($P = 0.06$), and shorter DFS ($P = 0.12$). No significant associations were seen between high proliferative index and RR or OS. In multivariate analyses, tumor thickness was the strongest predictor of clinical outcome. CONCLUSIONS: In primary cutaneous melanoma, a high proliferative index is associated with clinicopathologic parameters predictive of worse clinical outcomes. However, it was not an independent predictor of clinical outcome
— id: J0053883, year: 2002, vol: 95, page: 634, stat: Journal Article,

Dysplastic changes in different types of melanocytic nevi. A unifying concept
Toussaint S; Kamino H
26(2):84-90, 1999 Feb, Journal of cutaneous pathology
We observed histopathologic changes previously described in dysplastic melanocytic nevi in association with a dermal component characteristic of other types of melanocytic nevi or overlapping with features of other varieties of nevi. In order to determine the frequency of these changes, we studied 2,164 cases of compound melanocytic nevi that fulfilled the histopathologic criteria for the diagnosis of compound dysplastic nevus, including architectural pattern, cytologic features, and mesenchymal changes. Of the 2,164 compound dysplastic melanocytic nevi, 1,895 (87.6%) had the histopathologic characteristics previously described for dysplastic nevus, 179 (8.3%) showed a dermal component with a congenital pattern, 67 (3.1%) demonstrated epidermal and dermal characteristics of Spitz's nevus, 8 (0.3%) had features of a combined blue nevus, 13 (0.6%) had a halo phenomenon and 2 (0.1%) showed dermal neuronevus. By considering these nevi as variants of dysplastic nevi, one may apply a unified conceptual basis for their nomenclature. In order to completely describe the appearance of the nevus, we named them by adding the term 'dysplastic', to their main histopathologic subtype. Accordingly, six different varieties of dysplastic nevi were identified: 1) dysplastic nevus (original); 2) dysplastic nevus with a congenital pattern; 3) dysplastic Spitz's nevus; 4) dysplastic combined blue nevus; 5) dysplastic halo nevus; and 6) dysplastic neuronevus. In summary, we conclude that the histopathologic criteria previously reported for the diagnosis of dysplastic nevi may be found in association with a dermal component characteristic of other types of melanocytic nevi or may have overlapping features with other variants of nevi
— id: J0002586, year: 1999, vol: 26, page: 84, stat: Journal Article,

Benign epidermal proliferations
Toussaint S; Salcedo E; Kamino H
1999;14:307-57, Advances in dermatology
— id: J0009172, year: 1999, vol: 14, page: 307, stat: Journal Article,

A sub-set of common acquired blue nevi appear to be derived from the melanocytes of hair follicles
Oliver, G; Tapia, B; Tam, S; Kamino, H
26(9): 454, 1999 November 4-7, Journal of cutaneous pathology
— id: J0017130, year: 1999, vol: 26, page: 454, stat: Journal Article,

Treatment of mature striae with the pulsed dye laser
Nehal KS; Lichtenstein DA; Kamino H; Levine VJ; Ashinoff R
1999 Jan;1(1):41-4, Journal of cutaneous laser therapy

INTRODUCTION: Striae are a common cosmetic problem with no effective treatment options. A recent study has shown improvement in the appearance of mature striae following a single 585-nm pulsed dye laser (PDL) treatment at low fluence. OBJECTIVE: To evaluate the effectiveness of treating mature striae with the 585-nm PDL. METHODS: Five patients with mature striae on the abdomen were prospectively treated with the 585-nm PDL at 2-month intervals for 1-2 years. The response of the striae to laser treatment was evaluated in each patient through sequential clinical, photographic, textural, and histologic assessment. RESULTS: All five patients reported a slight overall improvement in the appearance of the striae following multiple PDL treatments. Comparison of pre- and post-treatment photographs, however, failed to reveal improvement in any patients. Optical profilometry performed on striae impressions showed mild improvement in the surface texture of striae in three patients. Histologic comparison of pre- and post-treatment biopsy specimens failed to reveal normalization of skin architecture. CONCLUSIONS: Serial treatment of mature striae with the PDL results in mild, subjective, clinical improvement but no significant photographic, textural or histologic improvement

— id: J0022573, year: 1999, vol: 1, page: 41, stat: Journal Article,

Histopathologic and immunohistochemical diagnosis of benign and malignant fibrous and fibrohistiocytic tumors of the skin

Kamino H; Salcedo E

1999 Jul;17(3):487-505, Dermatologic clinics

This article describes the histopathology and immunohistochemistry of benign and malignant fibrous and fibrohistiocytic tumors. Some of the benign fibrohistiocytic proliferation's have atypical variants which could be misinterpreted as malignant processes. Key points for the diagnosis of these entities based on routine histology and immunohistochemistry are presented

— id: J0000323, year: 1999, vol: 17, page: 487, stat: Journal Article,

Cytokeratin 7 positive toker cells in supernumerary nipples

Baldassano, M F; Tam, S; Kamino, H

26(9): 472, 1999 November 4-7, Journal of cutaneous pathology

— id: J0017129, year: 1999, vol: 26, page: 472, stat: Journal Article,

Changing trends in the frequency of basal cell carcinoma (BCC) and squamous cell carcinoma (SCC)

Baldassano, M F; Kamino, H

26(9): 455, 1999 November 4-7, Journal of cutaneous pathology

— id: J0017127, year: 1999, vol: 26, page: 455, stat: Journal Article,

Diagnosis: psoriasis or not? What are the clues?

Altman EM; Kamino H

1999 Mar;18(1):25-35, Seminars in cutaneous medicine & surgery

Psoriasis is a common inflammatory, hyperproliferative skin disorder that affects 1% to 2% of the population of Western Europe and the United States. Because the clinical presentation of psoriasis is varied, many times the definitive diagnosis depends on the histological examination. However, the histological changes of psoriasis are as varied as the clinical presentations. Therefore, a combination of histopathologic features must be present for the diagnosis of psoriasis to be made. In this article, we review the clues for the histopathologic diagnosis of each type and stage of psoriasis, such as psoriasis vulgaris, pustular psoriasis, and erythrodermic psoriasis, as well as the histopathologic differential diagnosis of these entities

— id: J0002342, year: 1999, vol: 18, page: 25, stat: Journal Article,

Cutaneous hemangiopericytomas [Abstract]

Velazquez, E; Tam, S; Kamino, H

1998;11(Suppl 1):54A-54A, Modern pathology

— id: J0094782, year: 1998, vol: 11, page: 54A, stat: Journal Article,

Short-pulse carbon dioxide laser resurfacing in the treatment of rhytides and scars. A clinical and histopathological study

Shim E; Tse Y; Velazquez E; Kamino H; Levine V; Ashinoff R

24(1):113-7, 1998 Jan, Dermatologic surgery

BACKGROUND: Previous studies have shown the efficacy of short-pulse carbon dioxide (CO2) lasers in the treatment of rhytides and scars. To date, there have been few studies examining the histological aspects of these treatments. OBJECTIVE: The purpose of this study was to perform a prospective clinical and histopathological study of CO2 laser resurfacing for improvement of facial rhytides and scars. METHODS: A total of 23 patients were studied. Clinical improvement was evaluated both pre- and postoperatively using photographs and optical profilometry. Skin biopsies of rhytides were also obtained. RESULTS: Postoperatively, rhytides and scars both demonstrated significant increases in clinical improvement scores. Results from optical profilometry studies reflected these results. Skin biopsies from rhytides posttreatment demonstrated increases in collagen layer thickness. Improvement was sustained as late as 1 year following treatment. CONCLUSIONS: Histopathological studies suggest improvement of rhytides and scars by CO2 laser resurfacing may be attributed to new collagen formation following treatment

— id: J0003168, year: 1998, vol: 24, page: 113, stat: Journal Article,

Melanocytic nevi in malignant melanomas

Wasti QH; Toussaint S; Kopf AW; Kamino H; Provost N; Bart RS

1997;2(1):2-6, Journal of cutaneous medicine & surgery

— id: J0111924, year: 1997, vol: 2, page: 2, stat: Journal Article,

Globulelike dermoscopic structures in pigmented seborrheic keratosis [Letter]

Provost N; Kopf AW; Rabinovitz HS; Oliviero MC; Toussaint S; Kamino HH

1997 Apr;133(4):540-1., Archives of dermatology

— id: J0018187, year: 1997, vol: 133, page: 540, stat: Journal Article,

Concerning small diameter invasive melanoma [Letter]

Kamino H; Ratech H

1997 Apr;24(4):262-3., Journal of cutaneous pathology

— id: J0018186, year: 1997, vol: 24, page: 262, stat: Journal Article,

A clinical and histologic evaluation of two medium-depth peels. Glycolic acid versus Jessner's trichloroacetic acid

Tse Y; Ostad A; Lee HS; Levine VJ; Koenig K; Kamino H; Ashinoff R

1996 Sep;22(9):781-6, Dermatologic surgery

BACKGROUND: Chemical peels using alpha hydroxy acids have become one of the most frequently requested dermatologic procedures. The use of glycolic acid in superficial chemical peels is now well established. However, the role of glycolic acid in medium-depth chemical peels has yet to be elucidated. OBJECTIVE: We performed a clinical and histologic comparison of 70% glycolic acid versus Jessner's solution as part of a medium-depth chemical peel using 35% trichloroacetic acid (TCA). METHODS: Thirteen patients with actinic keratoses, solar lentigines and fine wrinkling were evaluated prospectively. Each patient was treated with 70% glycolic acid plus 35% TCA (GA-TCA) to the right face and Jessner's solution plus 35% TCA (JS-TCA) to the left face. Clinical and histologic changes were evaluated at 7, 30, and 60 days postoperatively. RESULTS: Clinically, the GA-TCA peel was effective in treating photodamaged skin.

The GA-TCA peel was slightly more efficacious in removing actinic keratoses (clinical response score = 1.5) than the JS-TCA peel (clinical response score = 1.0). Histologically, the GA-TCA peel caused the formation of a slightly thicker Grenz zone (mean = 0.053 mm) 60 days postpeel than the JS-TCA peel (mean = 0.048 mm) (not statistically significant). The GA-TCA peel caused more neoelastogenesis than the JS-TCA peel, while the JS-TCA peel resulted in more papillary dermal fibrosis and neovascularization than the GA-TCA peel. CONCLUSION: The GA-TCA peel is a new medium-depth chemical peel that is effective in treating photodamaged skin
— id: J0010265, year: 1996, vol: 22, page: 781, stat: Journal Article,

Induction of primary cutaneous melanocytic neoplasms in urokinase-type plasminogen activator (uPA)-deficient and wild-type mice: cellular blue nevi invade but do not progress to malignant melanoma in uPA-deficient animals

Shapiro RL; Duquette JG; Roses DF; Nunes I; Harris MN; Kamino H; Wilson EL; Rifkin DB

1996 Aug 1;56(15):3597-604, Cancer research

Evidence suggests that the plasminogen activators (PAs), in particular urokinase-type PA (uPA), play a pivotal role in tumor invasion and metastasis. We studied the contribution of the PAs to the malignant phenotype through the chemical induction of melanocytic neoplasms in uPA-deficient mice. Primary tumors were induced and promoted concurrently in 35 uPA-/- deficient and 35 uPA+/+ wild-type mice using a single application of 7,12-dimethylbenz(a)anthracene followed by repetitive applications of croton oil. Animals were sacrificed at 60-day intervals for 1 year. At necropsy, the four largest pigmented lesions in each animal were excised, characterized histologically, and evaluated microscopically for evidence of invasion. The regional lymph nodes, lungs, and solid abdominal visceral organs were sectioned and examined microscopically for evidence of metastatic disease. Cellular blue nevi were induced in 100% of uPA-/- and uPA+/+ promoted animals. Although a reduction in the radial and vertical progression of these lesions was noted in the uPA-deficient mice compared with the wild-type group, more than 95% of cellular blue nevi induced in both groups of animals invaded the underlying tissues. These lesions did not metastasize to the regional lymph nodes. Malignant melanoma arose in 5 of 35 (14.3%) of promoted wild-type mice. These tumors were locally aggressive, produced tissue-type PA, but were not metastatic to the regional nodes, lungs, or abdominal viscera. These results indicate that the invasive capability of melanocytic lesions may depend more on tissue-type PA than uPA activity. No melanomas were induced in the uPA-/- mice. The resistance of the uPA -/- strain to melanoma induction suggests that uPA contributes to malignant progression. We propose that the absence of uPA negatively affects tumorigenesis by decreasing the liberation and availability of growth factors such as basic fibroblast growth factor
— id: J0010306, year: 1996, vol: 56, page: 3597, stat: Journal Article,

Atypical cutaneous changes after topical treatment with nitrogen mustard in patients with mycosis fungoides

Reddy VB; Ramsay D; Garcia JA; Kamino H

1996 Feb;18(1):19-23, American journal of dermatopathology

Side effects in the treatment of mycosis fungoides with topical nitrogen mustard include allergic contact dermatitis, hyperpigmentation, urticaria, and erythema multiforme-like dermatitis. We reviewed biopsy specimens from 10 patients with mycosis fungoides who were treated with topical nitrogen mustard for 10-76 months. There was no history of oral psoralen with long-wave UV radiation treatment, radiotherapy, or systemic chemotherapy. Control biopsies taken from erythematous or poikilodermatous patches on the trunk or proximal extremities showed epidermal and dermal changes associated with cytologic atypia that were not present before treatment. These changes included slight epidermal hyperplasia with foci of flat rete ridges, atypical keratinocytes with large nuclei, mostly in the lower portion of the epidermis; suprabasal mitotic figures; a few dyskeratotic cells, focal vacuolar alteration of the epidermal basal layer; increased number of slightly enlarged junctional melanocytes; melanophages in the papillary dermis; dilated blood vessels lined by plump, atypical endothelial cells; and large fibroblasts with atypical nuclei. These atypical histologic

changes resemble, in part, those described in association with systemic chemotherapeutic agents, such as etoposide, busulfan, and bleomycin. We conclude that topical nitrogen mustard should be added to the list of chemotherapeutic agents that can produce atypical histologic changes in the skin
— id: J0001722, year: 1996, vol: 18, page: 19, stat: Journal Article,

Cutaneous cryptococcosis and histoplasmosis coinfection in a patient with AIDS
Myers SA; Kamino H
1996 May;34(5 Pt 2):898-900., Journal of the American Academy of Dermatology
Patients with AIDS may have multiple infections at one time, and skin lesions resulting from simultaneous infections with more than one organism have been described. We report a case of disseminated cryptococcal and histoplasmosis infections with cutaneous lesions in a patient with AIDS. In addition, we demonstrate the first case of two coexisting fungal infections in a unique skin lesion. The cutaneous presentation of infectious disorders in HIV-infected patients is often nondescript and not diagnosed by clinical observation alone. Biopsies and cultures are essential for making accurate diagnoses in immunocompromised patients with unusual skin lesions
— id: J0018190, year: 1996, vol: 34, page: 898, stat: Journal Article,

Eccrine gland infiltration by mycosis fungoides
Hitchcock MG; Burchette JL; Olsen EA; Ratech H; Kamino H
1996 Oct;18(5):447-53., American journal of dermatopathology
After identifying prominent eccrine infiltration by atypical lymphocytes in a biopsy of tumor stage mycosis fungoides (MF), we sought to determine the pattern of eccrine epithelial infiltration in MF. The frequency, intensity, and distribution of infiltration of eccrine gland structures, including acrosyringium, duct and coil epithelium, was studied by examining 71 biopsy specimens from 42 patients with MF in which eccrine structures were present. These were obtained from a retrospective review of pathologic specimens from Duke University Medical Center from 1992 and 1993. At least focal eccrine infiltration was noted in 23 of the 71 biopsy specimens (32%). Immunohistochemical confirmation of T-lymphocyte phenotype was performed in the 23 cases with positive reaction to antibodies CD3 and CD45RO and negative reaction with CD20. Folliculosebaceous units were present in 22 of the 71 biopsy specimens and were at least focally involved by MF in 11 (50%) in this series. A control group of biopsy specimens of reactive dermatoses were characterized by more superficial location of lymphocytes, with more spongiosis and epithelial degenerative changes. These findings further illustrate the epitheliotropic behavior of MF
— id: J0018188, year: 1996, vol: 18, page: 447, stat: Journal Article,

Hyperkeratotic nodule. Keratoacanthomalike pilomatricoma
Faust HB; Clark RE; Kamino H
1996 May;132(5):573, 576., Archives of dermatology
— id: J0018189, year: 1996, vol: 132, page: 573, 576, stat: Journal Article,

Differential expression of the H-ras mutated and normal alleles in rabbit DMBA-induced keratoacanthomas
Matesanz F; Oliva MR; Villamarin A; Kamino H; Pellicer A
1995 May 29;61(5):679-82, International journal of cancer
Keratoacanthomas (KAs) are benign and self-regressing tumors in which a high incidence of the mutated H-ras oncogene has been observed both in humans and in experimental models. To determine the level of expression of the mutated H-ras allele with respect to its normal counterpart in 7,12-dimethylbenz(a)anthracene (DMBA)-induced KAs in rabbit skin, we have utilized a quantitative technique based on reverse transcription polymerase chain reaction (RT-PCR) and selective cleavage of the mutated molecules of the H-ras gene. Analysis of 16 KAs showed that the mutated H-ras transcripts were up to 3-fold more abundant than the non-mutated H-ras transcript in the different tumors. This higher

expression of the mutated allele appears to correlate with increased differentiation in the KAs and in turn may contribute to tumor regression
— id: J0104228, year: 1995, vol: 61, page: 679, stat: Journal Article,

Neutrophil-rich, Ki-1-positive anaplastic large-cell malignant lymphoma
Mann KP; Hall B; Kamino H; Borowitz MJ; Ratech H
1995 Apr;19(4):407-16., American journal of surgical pathology
The presence of neutrophils, in the absence of necrosis, is uncommon in malignant lymphoma (ML). We identified a subgroup of Ki-1-positive anaplastic large cell ML (Ki-1 ALCL) in which neutrophils were a prominent component. Six of 20 cases of Ki-1 ALCL had a significant neutrophil infiltrate that varied from 5 to 10% to > 50% of cells per high power field. Neutrophils were not seen in 100 cases of other types of ML reviewed. Patients were first seen with skin lesions (four), localized lymphadenopathy (three), generalized lymphadenopathy (one), and localized extranodal disease (one). All had primary disease. Two patients had peripheral neutrophilia. Three of six patients had clinical stage IV disease. Four patients are currently in clinical remission; one died of recurrent disease; and one patient with acquired immunodeficiency syndrome (AIDS) died of Pneumocystis carinii pneumonia. Four cases demonstrated a T-cell phenotype, one of which arose in a patient with AIDS. Two had a B-cell phenotype. All cases were positive for CD30 (Ki-1). These observations expand the morphologic spectrum of Ki-1 ALCL to include a neutrophil-rich variant. We conclude that the presence of neutrophils is another morphologic feature shared by some cases of Ki-1 ALCL, lymphomatoid papulosis, and Hodgkin's disease, which suggests a possible pathogenetic link among them
— id: J0018192, year: 1995, vol: 19, page: 407, stat: Journal Article,

Lymphoepithelioma-like carcinoma of the skin treated with Mohs micrographic surgery in combination with immune staining for cytokeratins
Jimenez F; Clark RE; Buchanan MD; Kamino H
1995 May;32(5 Pt 2):878-81., Journal of the American Academy of Dermatology
Lymphoepithelioma-like carcinoma of the skin (LLCS) is a rare cutaneous neoplasm that histologically resembles nasopharyngeal lymphoepithelioma. Conventional surgical excision carries a considerable rate of recurrence (three of 11 reported cases with such treatment, with one patient dying of metastatic disease). We report the first case of lymphoepithelioma-like carcinoma of the skin treated with Mohs micrographic surgery. Because of its tendency to occur on the face and its potential for recurrence after incomplete removal, this tumor is a good candidate for treatment with Mohs micrographic surgery. Immunohistochemical staining of frozen sections for cytokeratins may help to detect neoplastic cells that may be obscured by the dense lymphoplasmacytic infiltrate associated with this tumor
— id: J0018191, year: 1995, vol: 32, page: 878, stat: Journal Article,

COLLAGENOUS VARIANT OF DERMATOFIBROSARCOMA PROTUBERANS [Abstract]
KAMINO, H; MCDONAGH, D; BURCHETTE, JL; TAM, ST
1994 JAN;70(1):A46-A46, Laboratory investigation
— id: J0168701, year: 1994, vol: 70, page: A46, stat: Journal Article,

Treatment of Mycobacterium haemophilum infection with an antibiotic regimen including clarithromycin
Darling TN; Sidhu-Malik N; Corey GR; Allen NB; Kamino H; Murray JC
1994 Sep;131(3):376-9., British journal of dermatology
A patient with rheumatoid arthritis developed ulcerated nodules predominantly on his legs. Skin biopsy and culture demonstrated rheumatoid vasculitis and infection with Mycobacterium haemophilum. Improvement was not seen until clarithromycin was added to his treatment regimen
— id: J0018193, year: 1994, vol: 131, page: 376, stat: Journal Article,

Neonatal pemphigus vulgaris in a child born to a woman in remission

Tope WD; Kamino H; Briggaman RA; Rico MJ; Prose NS

1993 Sep;29(3):480-5., Journal of the American Academy of Dermatology

We describe the tenth reported case of neonatal pemphigus that mimicked Bart's syndrome and review previously published cases. Unlike previous cases, the child was born with significant blistering to a mother who was in complete remission throughout the pregnancy. High antepartum maternal titers of anti-intercellular space antibodies, increased maternal disease activity, and maternal disease that requires high doses of corticosteroids or use of combined therapy correlate with poor fetal outcome, including intrauterine death

— id: J0018195, year: 1993, vol: 29, page: 480, stat: Journal Article,

Persistent plaque on the shoulder of a Chinese woman. BCG granuloma

Renfro L; Miller D; Raszi L; Kamino H

1993 Feb;129(2):233, 236, Archives of dermatology

— id: J0011516, year: 1993, vol: 129, page: 233, 236, stat: Journal Article,

Eruptive pseudoangiomatosis: a unique childhood exanthem?

Prose NS; Tope W; Miller SE; Kamino H

1993 Nov;29(5 Pt 2):857-9., Journal of the American Academy of Dermatology

We describe three children with an acute onset and spontaneous resolution of angioma-like papules during an apparent viral illness. A biopsy specimen from one patient revealed a unique histologic appearance that consisted of dilated dermal blood vessels with plump hobnail-shaped endothelial cells. On the basis of the natural history and histopathologic features of this exanthem, we suggest the name eruptive pseudoangiomatosis

— id: J0018194, year: 1993, vol: 29, page: 857, stat: Journal Article,

AIDS-associated Kaposi's sarcoma in Romanian children

Orlow SJ; Cooper D; Petrea S; Kamino H; Popescu V; Lawrence R; Leibovitz E

1993 Mar;28(3):449-53, Journal of the American Academy of Dermatology

BACKGROUND: Kaposi's sarcoma (KS) is commonly associated with the acquired immunodeficiency syndrome (AIDS) in adults. Little is known regarding its occurrence in children. OBJECTIVE: Our purpose was to report the clinical and epidemiologic characteristics of KS in three Romanian children with AIDS and to compare them with previously reported AIDS-associated KS in children. METHODS: This was a clinicopathologic study and computer-based literature review. RESULTS: All three Romanian children had skin involvement; two had involvement of lymph nodes and internal organs. All had acquired human immunodeficiency virus (HIV) infection postnatally. Including these children, 33 cases of AIDS-associated KS in children have been reported. Thirteen of 30 evaluable patients had acquired HIV infection postnatally; nine of these children (69%) had cutaneous involvement by KS. A perinatal route of transmission was present in the remaining 17 cases; only two of these children (12%) with KS had cutaneous involvement. No case was noted in which intravenous drug use was the sole parental HIV risk factor. CONCLUSION: The data support the contention that KS is caused by a second infectious agent prevalent only in certain HIV-infected populations. Children of parents in high-risk groups for KS and children who acquire HIV via contaminated blood or blood products are at highest risk for KS. The route of acquisition of HIV infection may also be associated with different clinical manifestations of KS in children

— id: J0011472, year: 1993, vol: 28, page: 449, stat: Journal Article,

Acquired cutaneous smooth muscle hamartoma

Darling TN; Kamino H; Murray JC

1993 May;28(5 Pt 2):844-5., Journal of the American Academy of Dermatology

A 35-year-old white man had an indurated, indistinct plaque on the anterior aspect of the neck for 10 years. Results of biopsy specimens showed an excess of smooth muscle bundles scattered throughout the dermis. Unlike previously reported cases of acquired smooth muscle hamartomas, it did not occur in association with a Becker nevus
— id: J0018196, year: 1993, vol: 28, page: 844, stat: Journal Article,

Painful, plaque-like, pitted keratolysis occurring in childhood
Shah AS; Kamino H; Prose NS
1992 Sep;9(3):251-4., Pediatric dermatology
Pitted keratolysis is a superficial infection of the soles of the feet that is almost always asymptomatic. A painful variant of this disorder was reported to occur in adult males during military service. We report painful, plaque-like, pitted keratolysis in two children. Treatment with topical erythromycin was curative
— id: J0018198, year: 1992, vol: 9, page: 251, stat: Journal Article,

Painful nodules in a young female. Antiphospholipid syndrome
Renfro L; Franks AG Jr; Grodberg M; Kamino H
1992 Jun;128(6):847-8, 850-1, Archives of dermatology
— id: J0011984, year: 1992, vol: 128, page: 847, stat: Journal Article,

Multiple subcutaneous leiomyosarcomas in an adolescent with AIDS
Orlow SJ; Kamino H; Lawrence RL
1992 Aug;14(3):265-8, American journal of pediatric hematology-oncology
The case of 17-year-old boy with thalassemia major who contracted the human immunodeficiency virus (HIV) through multiple transfusions is described. Eight years after the onset of generalized lymphadenopathy, and 5 years after the documentation of HIV infection on serologic grounds, he developed the first of multiple, painful, subcutaneous nodules, which proved to be leiomyosarcomas of vascular origin. The histopathology and possible pathogenesis of these unusual tumors are discussed
— id: J0011872, year: 1992, vol: 14, page: 265, stat: Journal Article,

Bacillary angiomatosis in a child undergoing chemotherapy
Myers SA; Prose NS; Garcia JA; Wilson KH; Dunsmore KP; Kamino H
1992 Oct;121(4):574-8., Journal of pediatrics
Bacillary angiomatosis is an infectious disease of the skin and viscera characterized by vascular lesions, originally described in patients with human immunodeficiency virus infection. There are also case reports of bacillary angiomatosis occurring in immunocompetent patients and in noninfected patients with suppressed immune function. We report a case of bacillary angiomatosis in a child undergoing chemotherapy for acute leukemia
— id: J0018197, year: 1992, vol: 121, page: 574, stat: Journal Article,

Unusual benign fibrous and fibrohistiocytic tumors of the skin
Kamino H; Reddy VB
1992 Jan;10(1):203-17., Dermatologic clinics
This article reviews recently reported unusual benign fibrous and fibrohistiocytic tumors of the skin. Some of these lesions are variants of common and well-known entities. Because some of these variants have cytologic atypia, they could be confused with malignant neoplasms
— id: J0018199, year: 1992, vol: 10, page: 203, stat: Journal Article,

Dermatomyofibroma. A benign cutaneous, plaque-like proliferation of fibroblasts and myofibroblasts in young adults [see comments]

Kamino H; Reddy VB; Gero M; Greco MA

19(2):85-93, 1992 Apr, Journal of cutaneous pathology

We report nine examples of a distinct cutaneous plaque-like proliferation of fibroblasts and myofibroblasts. Eight of nine lesions were located in or around the shoulder, including axilla and upper arm. There was a predominance of women to men of 8:1. The lesions measured from 1 to 2 cm in greatest diameter. All patients were young adults (mean age 29.8 yr). All lesions involved the reticular dermis in a plaque-like fashion and extended to the upper part of the subcutaneous septa in seven cases. The lesions consisted of a proliferation of very uniform slender spindle-shaped cells arranged as well-defined elongated and intersecting fascicles with a predominantly parallel arrangement to the skin surface. There was no evidence of cytologic atypia and mitotic figures were infrequent. The spindle-shaped cells were separated by thin collagen fibers. Elastic fibers were preserved and some of them appeared thicker than normal. All adnexal structures were spared. Immunohistochemistry revealed that the cells stained positively for vimentin and muscle actin, but lacked smooth-muscle specific actin, desmin, and S-100 protein. Some dermal dendrocytes stained positively for Factor XIIIa, but the spindle-shaped cells were negative. Electron microscopy studies revealed a mixture of fibroblasts, myofibroblasts, and undifferentiated mesenchymal cells. All lesions were treated by conservative excision; follow-up information revealed no evidence of recurrence. We name this distinct lesion dermatomyofibroma. To the best of our knowledge, this entity has not been previously described in the literature

— id: J0000795, year: 1992, vol: 19, page: 85, stat: Journal Article,

Ulcerative lichen planus-like dermatitis associated with hydroxyurea

Renfro L; Kamino H; Raphael B; Moy J; Sanchez M

1991 Jan;24(1):143-5, Journal of the American Academy of Dermatology

— id: J0013022, year: 1991, vol: 24, page: 143, stat: Journal Article,

SMALL MALIGNANT MELANOMAS - CLINICOPATHOLOGICAL CORRELATION AND DNA PLOIDY ANALYSIS - REPLY

KAMINO, H; RATECH, H

1991 JUN;24(6):1036-1036, Journal of the American Academy of Dermatology

— id: J0088440, year: 1991, vol: 24, page: 1036, stat: Journal Article,

SMALL MALIGNANT MELANOMAS - REPLY

KAMINO, H; KIRYU, H; RATECH, H

1991 MAR;24(3):513-514, Journal of the American Academy of Dermatology

— id: J0088757, year: 1991, vol: 24, page: 513, stat: Journal Article,

Immunoperoxidase technique modified by counterstain with azure B as a diagnostic aid in evaluating heavily pigmented melanocytic neoplasms

Kamino H; Tam ST

1991 Dec;18(6):436-9, Journal of cutaneous pathology

Heavily-pigmented melanocytic neoplasms are difficult to evaluate on routine hematoxylin and eosin stained slides because pigmented melanocytes are difficult to distinguish from the numerous melanophages that are usually seen in the background of these lesions. Immunoperoxidase staining for S100 protein or HMB-45 antibody using diaminobenzidine (DAB) as chromogen, which forms a brown product, does not adequately distinguish melanocytes from melanophages. We modified this technique by replacing hematoxylin as the counterstain with azure B, which stains melanin green-blue. Thus, positive melanocytes appear brown while melanin granules in their cytoplasm are green-blue. However, negative melanophages only stain green-blue. This technique is useful in evaluating heavily pigmented melanocytic lesions such as malignant melanomas, melanosis of regressing malignant melanoma, residual malignant melanoma in areas of

granulation tissue with melanophages, blue nevi, pigmented spindle cell variant of Spitz's nevi and combined nevi
— id: J0012393, year: 1991, vol: 18, page: 436, stat: Journal Article,

Volume of malignant melanoma is superior to thickness as a prognostic indicator. Preliminary observation
Friedman RJ; Rigel DS; Kopf AW; Grin CM; Heilman E; Bart RS; Kamino H; Harris MN; Roses DF; Postel AH; et al
1991 Oct;9(4):643-8, Dermatologic clinics
There are many clinical and histologic factors that are known to be valuable in predicting survival rates for patients with cutaneous malignant melanomas. Breslow thickness is considered to be the most reliable prognostic factor; however, thickness is a unidimensional measurement. A more accurate mensuration to predict biologic behavior might be one that takes into account the three-dimensional volume of the neoplasm. In a study of 35 primary malignant melanomas, the volumes of the dermal components of the tumors were calculated. Those patients with tumor volumes of 200 mm3 or less had a 91.4% 5-year disease-free survival rate, compared with survival rate of only 16.7% for those patients whose lesions had tumor volumes exceeding 200 mm3. On multivariate analysis, tumor volume exceeded thickness as a prognostic indicator. Thus, measurement of tumor volume proved to be of greater significance than thickness in predicting the outcome for patients with malignant melanomas
— id: J0012463, year: 1991, vol: 9, page: 643, stat: Journal Article,

ras activation in human tumors and in animal model systems
Corominas M; Sloan SR; Leon J; Kamino H; Newcomb EW; Pellicer A
1991 Jun;93:19-25, Environmental health perspectives
Environmental agents such as radiation and chemicals are known to cause genetic damage. Alterations in a limited set of cellular genes called proto-oncogenes lead to unregulated proliferation and differentiation. We have studied the role of the ras gene family in carcinogenesis using two different animal models. In one case, thymic lymphomas were induced in mice by either gamma or neutron radiation, and in the other, keratoacanthomas were induced in rabbit skin with dimethylbezanthracene. Human keratoacanthomas similar to the ones induced in rabbits were also analyzed. We found that different types of radiation such as gamma rays and neutrons, induced different point mutations in ras genes. A novel K-ras mutation in codon 146 has been found in thymic lymphomas induced by neutrons. Keratoacanthomas induced in rabbit skin by dimethylbenzanthracene show a high frequency of H-ras-activated genes carrying a mutation in codon 61. The same is observed in human keratoacanthomas, although mutations are in both the 12th and the 61st codons of the H-ras gene. H-ras activation is less frequent in human squamous cell carcinomas than in keratoacanthomas, suggesting that ras genes could play a role in vivo in differentiation as well as in proliferation
— id: J0012700, year: 1991, vol: 93, page: 19, stat: Journal Article,

Oncogene involvement in tumor regression: H-ras activation in the rabbit keratoacanthoma model
Corominas M; Leon J; Kamino H; Cruz-Alvarez M; Novick SC; Pellicer A
1991 Apr;6(4):645-51, Oncogene
Activated H-ras genes are present in a number of skin tumors induced in animals by carcinogen treatment. The involvement of the ras oncogenes in tumorigenesis was investigated in keratoacanthomas, benign and self-regressing tumors, as well as malignant squamous cell carcinomas. Both tumors were induced in rabbit ears by repeated applications of 7,12 dimethylbenz(a)anthracene (DMBA). The rabbit H-ras gene was cloned and sequenced. PCR analysis revealed that approximately 82% of the keratoacanthoma DNAs contained an A:T to T:A transversion in codon 61. The relative levels of H-ras transcript were increased in keratoacanthomas compared to normal skin and the activated allele was expressed in tumors, even during the regressing phase. Although a G:C to A:T mutation in codon 12 of the H-ras and an activated N-ras gene were found in two squamous cell carcinomas, the frequency of H-ras activation in codon 61 was much lower (40%) in the malignant tumours induced by the same carcinogen treatment. Therefore, DMBA induced at least two types of genetic lesions in this system: H-ras activation, present in most regressing

keratoacanthomas, and activation of other unidentified oncogenes which may result in the development of malignant tumors. Our observations indicate that expression of an activated H-ras gene, in this system, is neither sufficient to induce a malignant phenotype nor even capable of maintaining the growth of a benign tumor and suggest that it could be involved in tumor regression
— id: J0012821, year: 1991, vol: 6, page: 645, stat: Journal Article,

Small malignant melanomas: clinicopathologic correlation and DNA ploidy analysis
Kamino H; Kiryu H; Ratech H
1990 Jun;22(6 Pt 1):1032-8., Journal of the American Academy of Dermatology
Among the various clinical and histologic criteria used to differentiate between benign and malignant melanocytic neoplasms, emphasis has been placed on the size of the lesion. Malignant melanomas, when diagnosed, are usually larger than 6 mm in diameter whereas most acquired melanocytic nevi tend to be smaller. We tested this size criterion with a retrospective clinicopathologic study of 30 proliferations of atypical melanocytes within the epidermis and dermis that measured less than 6 mm in diameter. Nineteen cases fulfilled all 15 established histologic criteria for the diagnosis of malignant melanoma. The remaining 11 cases fulfilled 14 of 15 criteria. Four of eight of these small malignant melanomas analyzed by multiparameter flow cytometry were aneuploid (DNA ploidy index less than or equal to 0.9 or greater than or equal to 1.1). The sex ratio, race, and anatomic sites associated with these small melanomas were similar to those described in patients with malignant melanomas larger than 6 mm in diameter. Furthermore, one melanoma metastasized to a regional lymph node and another recurred. We conclude that small malignant melanomas less than 6 mm in diameter can have histologic features, DNA abnormalities, clinical presentations, and biologic potentials similar to larger lesions
— id: J0018202, year: 1990, vol: 22, page: 1032, stat: Journal Article,

Malignant melanoma with pseudocarcinomatous hyperplasia--an entity that can simulate squamous cell carcinoma. A light-microscopic and immunohistochemical study of four cases
Kamino H; Tam ST; Alvarez L
1990 Oct;12(5):446-51., American journal of dermatopathology
We report four unusual cases of malignant melanoma in which squamous cell carcinoma was strongly considered in the differential diagnosis on routine hematoxylin and eosin-stained sections due to the near absence of melanin and the presence of pseudocarcinomatous hyperplasia. Ultimately, immunohistochemical staining for S-100 protein and keratin established the correct diagnosis of malignant melanoma in all cases
— id: J0018201, year: 1990, vol: 12, page: 446, stat: Journal Article,

Dermatofibroma extending into the subcutaneous tissue. Differential diagnosis from dermatofibrosarcoma protuberans
Kamino H; Jacobson M
1990 Dec;14(12):1156-64, American journal of surgical pathology
When dermatofibromas are composed predominantly of fibroblasts and extend into the subcutaneous tissue, it may be difficult to distinguish them from dermatofibrosarcoma protuberans. Because the patterns of extension of dermatofibroma have not been well characterized, we studied 185 cases of the fibrous variant of dermatofibroma with extension into the subcutaneous tissue and 40 cases of dermatofibrosarcoma protuberans. Dermatofibromas had two main patterns of extension into subcutaneous tissue. One pattern, seen in 133 of 185 cases (72%), consisted of irregular extension into the subcutaneous tissue in a vertical or radial fashion, predominantly along the septa, which appeared wedge-shaped. The other pattern, seen in 52 of 185 cases (28%), showed a smooth and well-demarcated deep margin that bulged into the subcutaneous tissue. Dermatofibrosarcoma protuberans also had two main patterns of extension into the subcutaneous tissue. In one pattern, seen in 12 of 40 cases (30%), slender spindle-shaped cells extended along septa

and between fat cells in a classic honeycomb or lacelike pattern. The other pattern observed in 24 of 40 cases (60%) exhibited a distinct multilayered pattern in which the bundles of slender spindle-shaped cells showed a predominantly parallel orientation to the skin surface. In four cases (10%), a mixture of both patterns was present. We conclude that the patterns of extension of dermatofibroma into the subcutaneous tissue are different from the patterns of dermatofibrosarcoma protuberans
— id: J0013099, year: 1990, vol: 14, page: 1156, stat: Journal Article,

Compound blue nevus: a variant of blue nevus with an additional junctional dendritic component. A clinical, histopathologic, and immunohistochemical study of six cases
Kamino H; Tam ST
1990 Oct;126(10):1330-3., Archives of dermatology
We studied six cases of heavily pigmented melanocytic lesions with features of blue nevi within the dermis, but with an additional junctional dendritic component. This compound variant of blue nevus is an uncommon lesion that has not been previously identified as a distinct histologic entity. Immunoperoxidase staining for S100 protein and counterstaining with azure B distinguished the presence of melanocytes among numerous melanophages within the dermis. The compound variant of blue nevus can be distinguished histologically from combined blue nevus, pigmented spindle cell nevus, malignant melanoma, and melanosis due to a regressed malignant melanoma. The six lesions were from three men and three women whose ages ranged from 11 to 51 years (mean, 31 years). Three lesions were located on the trunk, two on the extremities, and one on the head. After a mean follow-up period of 47 months (range, 38 to 58 months), there was no evidence of recurrence
— id: J0018200, year: 1990, vol: 126, page: 1330, stat: Journal Article,

Carcinoid tumor of skin: report of a possible primary case
Bart RS; Kamino H; Waisman J; Lindner A; Colen S
1990 Feb;22(2 Pt 2):366-70., Journal of the American Academy of Dermatology
A case of a possible primary carcinoid tumor of the skin in a 40-year-old man is presented. The neoplasm was diagnosed as consistent with carcinoid tumor on the basis of conventional light microscopy, immunohistochemical studies, and electron microscopy. Workup revealed no evidence of carcinoid tumor elsewhere. Metastases to the skin from internal carcinoid tumors are uncommon, but presumed primary carcinoid tumors that arise in the skin are extremely rare; only three cases have been found in the English-language literature
— id: J0018203, year: 1990, vol: 22, page: 366, stat: Journal Article,

Pleomorphic fibroma of the skin: a benign neoplasm with cytologic atypia. A clinicopathologic study of eight cases
Kamino H; Lee JY; Berke A
1989 Feb;13(2):107-13, American journal of surgical pathology
A clinicopathologic study of eight examples of polypoid and dome-shaped cutaneous fibrous lesions with sparse cellularity but striking nuclear atypia and rare mitotic figures is presented. Positive immunohistochemical staining for vimentin and actin supported the fibroblastic nature of these lesions. All eight cases were adults whose ages ranged from 33 to 67 years (mean 52 years). Five were women and three were men. Five lesions were located on extremities, two on the trunk, and one on the face and they measured from 4 to 16 mm in greatest dimension. The lesions were clinically followed from 4 months to 5 years. They all showed benign clinical behavior, with only one local recurrence in a lesion that had been incompletely removed. The nuclear atypia seen in these fibrous lesions may be similar to that which occurs in other benign mesenchymal neoplasms, such as pleomorphic lipoma, pleomorphic leiomyoma, ancient schwannoma, and variants of dermatofibroma with atypical cells. We suggest that 'pleomorphic fibroma' is an appropriate term for this lesion based on its histologic differentiation, cytologic atypia, and benign clinical course
— id: J0007402, year: 1989, vol: 13, page: 107, stat: Journal Article,

Improved detection of aneuploidy in malignant melanoma using multiparameter flow cytometry for S100 protein and DNA content

Kamino H; Ratech H

1989 Sep;93(3):392-6, Journal of investigative dermatology

DNA aneuploidy has been demonstrated to be an independent parameter of prognostic significance in malignant melanomas. In order to improve the detection of DNA aneuploidy in malignant melanomas, and to minimize diploid non-tumor cells in the sample, we developed a two-color staining strategy for S100 protein and DNA content in paraffin embedded samples. The ability to detect aneuploidy, defined as DNA ploidy index less than or equal to 0.90 or greater than or equal to 1.10, in 37 stage I malignant melanoma samples by flow cytometry analysis was significantly improved from 10.8% of cases using traditional one-color analysis for DNA content only (propidium iodide) to 32.4% of cases using two-color analysis for simultaneous measurement of both DNA (propidium iodide) and S100 protein (fluorescein conjugated antibody) (Chi-square with Yates' correction; p less than 0.05). The largest increase in sensitivity was found in level I and II melanomas less than or equal to 0.76 mm in thickness. In addition, we report the new observation that multiple S100 protein-positive subpopulations were found significantly more frequently in malignant melanomas (23/37 cases) than in compound melanocytic nevi (5/22 cases) (Chi-square with Yates' correction; p less than 0.01). These findings suggest that there is a previously unsuspected degree of tumor heterogeneity even in thin, presumably early, malignant melanomas

— id: J0007049, year: 1989, vol: 93, page: 392, stat: Journal Article,

IMPROVED DETECTION OF ANEUPLOIDY IN MALIGNANT-MELANOMA USING MULTI-PARAMETER FLOW-CYTOMETRY FOR DNA AND S100 PROTEIN [Abstract]

Kamino, H; Ratech, H

1989;60(Suppl 1):A45-A45, Laboratory investigation

— id: J0042127, year: 1989, vol: 60, page: A45, stat: Journal Article,

Oncogene activation in human benign tumors of the skin (keratoacanthomas): is HRAS involved in differentiation as well as proliferation?

Corominas M; Kamino H; Leon J; Pellicer A

1989 Aug;86(16):6372-6, Proceedings of the National Academy of Sciences of the United States of America

In vitro DNA amplification followed by oligonucleotide mismatch hybridization was used to study the frequency of HRAS mutations in the benign self-regressing skin tumors keratoacanthomas and in squamous cell carcinomas. We used freshly obtained keratoacanthomas as well as Formalin-fixed paraffin-embedded tissues from both types of tumors. DNA from 50 samples of each tumor type was analyzed for activating mutations involving codons 12 and 61. A relatively high percentage (30%) of HRAS mutations was found in the keratoacanthomas compared with 13% in the squamous cell carcinomas. The most frequent mutation identified is the A-T-to-T.A transversion in the second position of codon 61. The present findings demonstrate the involvement of the HRAS oncogene in human benign tumors. Moreover, they indicate that an activated HRAS oncogene is not sufficient to maintain a neoplastic phenotype and argue against a role of HRAS in the progression of skin tumorigenesis

— id: J0007111, year: 1989, vol: 86, page: 6372, stat: Journal Article,

H-ras activation in benign and self-regressing skin tumors (keratoacanthomas) in both humans and an animal model system

Leon J; Kamino H; Steinberg JJ; Pellicer A

1988 Feb;8(2):786-93, Molecular & cellular biology

The involvement of the ras oncogenes in tumorigenesis was investigated in keratoacanthomas, which are benign and

self-regressing skin tumors, both in humans and in a corresponding animal model system. Keratoacanthomas were induced on rabbit ears by repeated applications of 7,12-dimethylbenz(a)anthracene. About 60% of the tumor DNAs produced transformed foci after transfection into NIH 3T3 cells, and in all of them the transforming gene was identified as H-ras by Southern and Northern (RNA) hybridization. Immunoprecipitation experiments suggested that the transforming rabbit H-ras protein carried a mutation in codon 61. In addition, an activated H-ras gene was detected in a human keratoacanthoma by using a nude mouse tumorigenesis assay after transfection of tumor DNA into NIH 3T3 cells. This is the first report of ras activation in a benign human tumor. The transforming human H-ras gene showed a point mutation in codon 61 that would result in leucine instead of the glutamine present in the normal gene product. The finding of ras activation in tumors that are not only benign but also self-regressing indicates that activated ras genes are not sufficient to maintain a neoplastic phenotype, although they likely play a role in early stages of tumorigenesis
— id: J0008146, year: 1988, vol: 8, page: 786, stat: Journal Article,

SMALL MALIGNANT MELANOMAS LESS THAN 6 MM IN DIAMETER - CLINICOPATHOLOGIC CORRELATION OF 30 CASES - DNA ANALYSIS OF 8 CASES [Abstract]
Kamino, H; Kiryu, H; Ratech, H
1988 OCT;15(5):317-317, Journal of cutaneous pathology
— id: J0040889, year: 1988, vol: 15, page: 317, stat: Journal Article,

PLEOMORPHIC FIBROMA OF THE SKIN - A BENIGN NEOPLASM WITH CYTOLOGIC ATYPIA - A CLINICOPATHOLOGIC STUDY OF 8 CASES [Abstract]
Kamino, H; Lee, JY; Berke, A
1988 OCT;15(5):317-317, Journal of cutaneous pathology
— id: J0040890, year: 1988, vol: 15, page: 317, stat: Journal Article,

Keratin and involucrin immunohistochemistry of nasopharyngeal carcinoma
Kamino H; Huang SJ; Fu YS
1988 Mar 15;61(6):1142-8., Cancer
Forty nasopharyngeal carcinomas (NPC) were studied by immunohistochemistry using an antibody to involucrin and the following three keratin antibodies: (1) an antibody to low molecular weight keratin reactive with nonsquamous epithelium, (2) a high molecular weight keratin antibody reactive with suprabasal squamous epithelium, and (3) a keratin antibody reactive with full thickness stratified epithelium. In its pattern of reactivity, the last antibody overlaps the low and high molecular weight keratin antibodies and is used as a broad spectrum keratin antibody. By World Health Organization (WHO) classification, the cases in this article included eight keratinizing squamous cell carcinomas, eight nonkeratinizing carcinomas, 20 undifferentiated carcinomas, and four adenocarcinomas. The antibody to broad spectrum keratin had an overall sensitivity of 87.5% and was positive in all eight keratinizing squamous cell carcinomas, seven nonkeratinizing carcinomas (87.5%), 18 undifferentiated carcinomas (90%), and two adenocarcinomas (50%). Low molecular weight keratin antibody stained one additional NPC, which was negative when broad spectrum keratin antibody was used. Involucrin and high molecular weight keratin antibodies demonstrated near parallel staining in all histologic classes; there was marked localization to areas of squamous differentiation. While involucrin is a marker for foci of greater squamous differentiation, broad spectrum keratin antibody may aid in the diagnosis of all histologic subtypes of NPC
— id: J0018204, year: 1988, vol: 61, page: 1142, stat: Journal Article,

COMPOUND DENDRITIC MELANOCYTIC NEVUS - A VARIANT OF BLUE NEVUS [Abstract]
Kamino, H

1987 DEC;14(6):360-360, Journal of cutaneous pathology
— id: J0041124, year: 1987, vol: 14, page: 360, stat: Journal Article,

Pathologic findings in adenosine deaminase-deficient severe combined immunodeficiency. I. Kidney, adrenal, and chondro-osseous tissue alterations

Ratech H; Greco MA; Gallo G; Rimoin DL; Kamino H; Hirschhorn R

1985 Jul;120(1):157-69., American journal of pathology

The authors have reviewed the autopsies of 8 patients with adenosine-deaminase-deficient severe combined immunodeficiency disease (ADA-SCID). Several new findings in nonlymphoid organs, including kidney and adrenal gland, and chondro-osseous tissue indicate the multisystem nature of this disorder. Examination of renal tissue in 7 of 8 cases showed mesangial sclerosis. This was confirmed in 3 cases by electron microscopy. One case, treated with multiple erythrocyte partial exchange transfusions for several years, had no mesangial sclerosis. Six of 8 cases showed adrenal-gland cortical sclerosis. Chondro-osseous tissue from vertebrae and costochondral junctions of 4 cases examined showed typical alterations previously reported in ADA-SCID such as short growth plates with few proliferating and some hypertrophic chondrocytes. The authors report the new observations of necrotic chondrocytes, as well as large amounts of cellular debris. These changes were not observed in the 2 other patients examined, who received bone marrow or multiple partial exchange transfusions. The distribution and severity of these lesions, their relationship to ADA replacement therapy, and their homology to mice treated with a potent ADA inhibitor suggests that, in addition to lymphoid dysfunction, disordered nucleoside metabolism due to absent ADA activity in ADA-SCID may be the cause of diverse multi-system pathologic changes in tissues which continue to differentiate or mature after birth
— id: J0018205, year: 1985, vol: 120, page: 157, stat: Journal Article,

Fibronectin in eosinophilic globules of Spitz's nevi

Kamino H; Jagirdar J

1984 Summer;6 Suppl(1):313-6., American journal of dermatopathology

Nine cases of Spitz's nevi, compound type, that had large homogeneous eosinophilic globules at the dermo-epidermal junction were stained with anti-fibronectin antibodies by the biotin-avidin indirect immunofluorescence technique. Fibronectin was demonstrated in all nine cases. This study demonstrates that fibronectin, which is present in the extracellular matrix material, is also localized in a homogeneous pattern in the eosinophilic globules of the Spitz's nevi
— id: J0018206, year: 1984, vol: 6 Suppl, page: 313, stat: Journal Article,

[Evaluation of a table for evaluation of clinical performance in relation to the educational goal]

Oda M; Okafuji T; Kamino H; Kobayashi T; Aoyama K

1983 Jun;24(6):356-9., Kango kyoiku = Japanese journal of nurses' education
— id: J0018207, year: 1983, vol: 24, page: 356, stat: Journal Article,

Lymphomatoid papulosis

Kamino H

1979 Spring;1(1):91-2., American journal of dermatopathology
— id: J0018209, year: 1979, vol: 1, page: 91, stat: Journal Article,

A histologic atlas of some common benign pigmented lesions of the skin

Kamino H; Ackerman AB

1979 Sep;5(9):718-21., Journal of dermatologic surgery & oncology
— id: J0018208, year: 1979, vol: 5, page: 718, stat: Journal Article,

Eosinophilic globules in Spitz's nevi. New findings and a diagnostic sign

Kamino H; Flotte TJ; Misheloff E; Greco MA; Ackerman AB

1979 Winter;1(4):319-24., American journal of dermatopathology

Dull pink globules were found within the epidermis in 65% of junctional, 75% of compound, and 25% of intradermal types of Spitz's nevi (the nevi of large spindle and/or epithelioid cells). These globules were PAS-positive, diastase-resistant and also were positive with the trichrome stain. Similar-appearing eosinophilic globules were noted in the epidermis in only 2% of malignant melanomas and in but 0.9% of ordinary melanocytic nevi. The globules in malignant melanomas and in ordinary melanocytic nevi were negative with PAS and trichrome stains. Therefore, the finding of PAS- and trichrome-positive eosinophilic globules within the epidermis is a helpful sign for histologic differentiation of Spitz's nevus from malignant melanoma

— id: J0018210, year: 1979, vol: 1, page: 319, stat: Journal Article,

Eosinophilic globules in Spitz's nevi: New findings and a diagnostic sign

Kamino, H; Misheloff, E; Ackerman, A B; Flotte, T J; Greco, M A

1979 Winter;1(4):323-4, American journal of dermatopathology

Dull pink globules were found within the epidermis in 65% of junctional, 75% of compound, and 25% of intradermal types of Spitz's nevi (the nevi of large spindle and/or epithelioid cells). These globules were PAS-positive, diastase-resistant and also were positive with the trichrome stain. Similar-appearing eosinophilic globules were noted in the epidermis in only 2% of malignant melanomas and in but 0.9% of ordinary melanocyte nevi. The globules in malignant melanomas and in ordinary melanocytic nevi were negative with PAS and trichrome stains. Therefore, the finding of PAS- and tri-chrome-positive eosinophilic globules within the epidermis is a helpful sign for histologic differentiation of Spitz's nevus from malignant melanoma.The histologic differentiation of Spitz's nevus (the nevus of large spindle and/or epithelioid cells) from malignant melanoma is of utmost importance in dermatopathology. Most authors agree that no single histologic finding enables absolute differentiation of the benign neoplasm from the malignant one. One of us (HK), while reviewing a large series of melanocytic lesions, observed distinctive eosinophilic globules within the epidermis and the dermis of many specimens of Spitz's nevus. The microscopic appearance of these globules and their significance is the subject of this paper

— id: J0153793, year: 1979, vol: 1, page: 323, stat: Journal Article,

A histologic atlas of vascular lesions

Wade TR; Kamino H; Ackerman AB

1978 Nov;4(11):845-50., Journal of dermatologic surgery & oncology

— id: J0018211, year: 1978, vol: 4, page: 845, stat: Journal Article,

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