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Topographical study of albino nasal cancer in a developing community

Abstract

An outstanding feature of skin cancer is its selection of the albino for attack in the tropics. In particular, the topographic selection has been of considerable interest. What stands out in the publications is the generalization that the face is the choice site for attack. Therefore, this paper draws attention to the nose with special reference to the Ibo ethnic group in Nigeria.

Keywords: Skin, albinism, tropics, cancer, nose, Nigerian Ibos

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Introduction

The research group from Kenya asserted that "Albinos in Africa are at constant risk of developing skin cancer due to damage caused by ultra-violet exposure".[1] This was put as "Albino is an established risk factor for skin cancer in Black Africans" by Nigerian authors.[2] What stands out is the generalization that the head and neck are the most frequent sites afflicted in Tanzania,[3,4] and Nigeria.[5,6] Therefore, this paper draws attention to the nose whose topography is deemed to be worthy of documentation.

Investigation

Birmingham (UK) authors hypothesized that the establishment of a histopathology data pool facilitates epidemiological analysis.[7] Now, such a pool was established at Enugu, erstwhile capital of Eastern Nigeria, to serve the Ibo ethnic group.[8] As the pioneer pathologist, I encouraged the sending of specimens provided that the HISTOLOGY REQUEST FORM contained epidemiological details. Moreover, since I retained a copy of the results, analysis was facilitated. Let me do so in Tabular Form.

Results and discussion

Previous works on malignancy in the albinos in this community varied. Firstly, no albino should suffer from extensive skin cancer let alone die there-from.[9] Secondly, albinism cancer requires worldwide epidemiological research.[10] Thirdly, the recurrent form of albino cancer should be recognized.[11] Fourthly, albino cancer will end if a community's cancer surveillance program is successful.[12] Fifthly, there is its adenoid cystic carcinoma variant.[13] Finally, the illness will end if what happened in the case of chimney sweeper's cancer in Britain, namely, the government's regulation stopping the employments of boys.[14] Here, it will be achieved through compulsory employment indoors! Regarding histological classification, there is more to it than the squamous cell variety. A good example was the albino that had on one slide from the face as many as the squamous, the basal celled and the adenoid cystic variety.[15]

Table 1 Epidemiological data on albino nasal cancer

No	Initials	Age	Sex	Doctor	Site	Cm	Carcinoma
1	NP	37	F	Onah	Alae nasi	3	Adenoid cystic
2	OC	30	F	Achebe	Alae nasi	4	Squamous
3	ON	40	M	Obadike	Dorsum	1	Basisquamous
4	OA	29	F	Achebe	Nasolabial	3	Squamous
5	EO	43	M	Achebe	Alae nasi	4	Adenoid cystic
6	OO	46	M	Achebe	Anterior	6	Basal cell
7	EO	20	M	Iregbulem	Vertex	3	Basosquamous
8	UG	50	F	Nnabuko	Alae nasi	3	Squamous

Conclusion

In consonance with the above case, the lesions in this cohort included also adenoid cystic carcinoma and basis squamous carcinoma. Moreover, owing to the clinicians being mandated to be observant in their Request Forms, the topographical assessments included mostly the alae nasi with the dorsum, anterior part and vertex.

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None.

Conflicts of interest

Author declares that there is no conflict of interest.

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