

Cancer Originating in Leg Ulcers was Unknown in 1806

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ABSTRACT

An Institution organized by a group of British physicians circulated, way back in 1806, 13 Queries geared to research on the nature of cancer. These were published in *The Edinburgh Medical and Surgical Journal*. Over the years, what happened? In particular, let us weigh the last Query, namely, “Why do leg ulcers not form cancers?” The answer is worthy of documentation. It turned out to be due to the non-availability of biopsy pathology!

Key words: Skin, ulcer, chronic, cancer, history, microscopy.

INTRODUCTION

Heavy weights, namely, Baillie, Sims, Willan, Sharpe, and Abernethy, formed an “Institution for Investigating the Nature of Cancer.” They published in 1806 13 QUERIES which they deemed to be worthy of researched answers (1). In this context, the last query was deemed by them to be curious. As they themselves wondered: “It is a curious fact, and worthy of particular notice, that no person with an old ulcer in the leg has ever been known to have cancer...” Today, this is farfetched. Accordingly, what was happening at that time?

HISTORICAL RESEARCH

The Biblical story of Lazarus is noteworthy (2). As the story had it, he was “full of sores” and “the dogs came and licked his sores.” Surely, his exposed leg ulcers must have presented a vantage venue!

By 1828, the eponymous Marjolin (3) gave an “account of malignification of chronic ulcers.” Owing to “concern about the possible risk of malignification of venous leg ulcers,” the literature of 152 cases was reviewed positively by Swedish authors (4). They concluded that the need existed of “certain alertness when treating this common disease.”

DISCUSSION

The epidemiology of chronic leg ulcers that become malignant has gained momentum of late

years. In particular, it has thrown some light on the association with malignancy. Thus, from Germany, a “wound healing” group (5) concluded that “Primary risk factors for malignant transformation include patient age and ulcer duration.”

The duration etiology was illustrated with a proved case of malignant transformation. It was reported from Haiti (6) thus:

Some patients waited an alarmingly long time before seeking medical care. A 54-year-old female presented with a painful lesion over the medial aspect of her upper calf. She had had the ulcer for 15 years, and it had been fungating for 6 months. She had palpable inguinal nodes, and a biopsy of the lesion revealed squamous cell carcinoma.

Leprosy and guinea worm diseases were spotted by a Nigerian group (7). Today, scars and chronic ulcers may even lead to limb amputation (8).

CONCLUSION

The explanatory factor revolves on the availability of the microscope. It's very era changed the horizon. Elsewhere (9), I sketched the historical antecedents from 1805 to 1891. But, above all else, there rises the historical development of the surgical pathology of cancer (10). In other words, the medical masters of yester years must have seen compatible cases whose identity remained for the emergence of

histological identification of such malignant onset!

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