Pigmented spindle cell melanocytic tumor
Pigmented Spindle Cell Nevus

This tumor, first described by Richard Reed in 1973, may be regarded as a variant of the Spitz nevus.
or as a distinctive clinicopathologic entity. In our experience and that of others, most cases differ significantly from melanoma, and this is facilitated by an understanding of the differences between these two common melanoma simulants.
Pigmented spindle cell melanocytic tumor = اﻠﻤﺼﻄﺒﻎ اﻠﻤﻐزﻠﻴﺔ اﻠﻤﻴﻠاﻨﻴﺔ اﻠﺨﻠاﻴﺎ

The lesions are usually 3 to 6 mm in diameter, deeply pigmented, and either flat or slightly raised. Most patients have several lesions. They are often mistaken for Spitz nevi, the lesions are generally stable after a relatively sudden appearance and a short-lived period of growth.
The pigmented spindle cell nevus is characterized by its relatively small size and its symmetry and by a
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Differential Diagnosis
The most important differential diagnosis is with melanoma of the superficial spreading type, atypical melanocytic proliferation of uncertain significance (SAMPUS) and provide a differential diagnosis of melanoma in situ or dysplastic nevus. In the former case, a reexcision procedure is recommended, whereas in the latter case we recommend continued observation for malignant transformation. Intradermal nodules may be difficult to distinguish from melanoma, and a descriptive diagnosis may be appropriate.