

Referral Support Service

Dermatology

D06

Bowen's Disease

Definition

- Bowen's disease is an intra-epidermal Squamous Cell Carcinoma (SCC) of the skin
- Incidence 15 per 100 000 (UK) Mean age 60-70 Female : male = 3:1

Exclude Red Flag Symptoms

- Squamous Cell Carcinoma
- Bowen's can progress to SCC in 3-5% of cases.

General Points

Clinical features

- Slow-growing, erythematous scaly pink skin plaques that cause few, if any, symptoms.
- No improvement with topical steroid – a useful diagnostic test.
- Lesions usually solitary and, in general, have a diameter of less than 5cm at diagnosis.
- Most lesions occur on sun-exposed areas (e.g. head and neck, and lower leg).
- Not unusually there are associated sun exposure related lesions such as BCC, SCC, actinic keratosis

[Bowen's Images](#)

Differential diagnosis of red scaly leg lesions:

- Eczema-often itchy, possibly discoid eczema
- Psoriasis-ask about FH, scale more marked when flicked
- Tinea-central clearing, itchy
- Superficial spreading BCC-look very carefully for a pearly, raised edge-stretch lesion and look from the side.
- Granuloma annulare–raised but smooth, usually annular, often skin coloured or pale pink.

Management

- Encourage smoking cessation
- Encourage weight loss (if appropriate)
- Consider establishing diagnosis with in-house punch biopsy in lesions that fail to respond to **Fluorouracil 5% cream (Efudix®)** or are not typical lesions, where expertise allows.
- Thorough skin examination for associated sun-exposure lesions

Treatment

- **Fluorouracil 5% cream (Efudix®)**

Responsible GP: Alison Hunter

Responsible Consultant: Julia Stainforth

Responsible Pharmacist: Laura Angus

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- bd for 2-4 weeks, provide patient information leaflet [here](#)
It often causes a quite severe inflammatory reaction, which is a normal part of the treatment, and patients need to be warned of this
If inflammation is brisk and severe – treatment may have been adequate so stop;
Soothing emollients can be used.
Review 6 weeks after end of treatment.
- **Imiquimoid (Aldara®)** not licensed but may be prescribed upon specialist advice. [Advice from BAD on Imiquimoid.](#)

Referral Information

Indications for referral

- Previous treatments tried and their effect.
- **Photograph of lesion**
- Any histology results
 - Relevant past medical/surgical history
 - Current regular medication
 - BMI/Smoking status

Investigations prior to referral

- Consider punch Biopsy (funded in some areas – under commissioning review for York pts)
- Refer if diagnostic doubt or lack of response to Rx.

Patient information leaflets/ PDAs

- [Bowen's PIL](#)
- [Patientuk PILS](#)
- For **Efudix** leaflet [click here](#)
- **Imiquimoid** [Patient leaflet](#)

References

- <http://www.patient.co.uk/doctor/bowens-disease-pro>
- [British Association of Dermatologists – Bowen's Disease](#)