

## ANDRÉ NANTA (1883-1963) AND THE NEVUS WHICH BEARS HIS NAME

ANDRÉ NANTA (1883-1963) I ZNAMIE, KTÓRE NOSI JEGO IMIĘ

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### Nevus of Nanta

A nevus of Nanta lesion is characterized by the presence of cutaneous ossification (osteoma cutis) of an existing melanocytic nevus [1-4]. It is postulated that secondary ossification is the consequence of folliculitis, trauma, or neoplastic proliferation, which may induce the dermal fibroblasts to differentiate into osteoblasts [1]. Histologically, the osteomas are composed of well-formed bony spicules with prominent cement lines and calcification. They may demonstrate osteoblasts, osteoclasts, and osteocytes and occasionally may even demonstrate bone marrow elements [2]. Notably, nevus of Nanta has a higher prevalence in women than in men, possibly due to the effect of estrogen stimulation on osteoblasts within the lesion. Of clinical significance, melanoma can occur in association with nevus of Nanta [4].

Using skeletal bone formation as a guide, two mechanisms of bone formation can be expected in the skin. First, enchondral ossification, which occurs in most of the long bones of the skeleton, involves a cartilaginous template that is subsequently ossified and replaced. Or more commonly, membranous bone formation is a result of direct bone formation without the cartilaginous anlage [2].

The osteomas in nevus of Nanta usually occur at the base of the melanocytic proliferation occurring mainly in the intradermal nevus but may rarely occur with nevi with junctional activities. In one series of 74 cases of primary and secondary cutaneous ossification, nevus of Nanta represented 26% (19 of 74) of the total osteomas identified and was the single most common lesion with osteoma formation [2].

### André Nanta (1883-1963)

André Nanta, French dermatologist, born in 31 May, 1883 [5,6]. He descended from Franche-Comte ancestry. He spent his childhood in toulous. He rapidly ascended into his medical field and become a professor of universities in 1934 [5].



**Figure 1. André Nanta (1883-1963). With permission from reference number 5**

He had multiple interest and contributions in dermatology. He presented a thesis on lymphodermia and myelodermia. He had a special interest in deep fungal infection and made several trips to Algeria for this purpose. This interest in mycosis led him to isolate a special strain in fungus named with his name; *aspergillus nantae* [5]. He worked also on cutaneous lipidosis, and eosinophilic granuloma [7] (Nanta-Gadrat disease). The Nanta name also remains attached to osteo-nevus described in 1911. He also contributed with his students Bazex and Dupré in understanding of congenital skin disorders [5]. He had several scientific assignments and he had been a president of Société Française de Dermatologie. André Nanta died on 27 May 1963 [5.6].

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