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**Table 1** Variables studied, summarizing materials and methods.

|  |  |  |
| --- | --- | --- |
| **Histopathological variables** | **Classification** | **Definitions** |
| Epidermis | Hyperkeratosis | Qualitative, nominal and dichotomic |  |
| Parakeratosis |
|  | Normal Epidermis  | Qualitative and nominal |  |
| Thin Epidermis |
| Irregular acanthosis  |
| Psoriasiform Acanthosis  |
|  | Vacuolar alteration of the basal layer | Qualitative, nominal and dichotomic |  |
| Lymphoid Infiltrate  | Superficial | Qualitative and nominal | According to its predominant distribution pattern |
| Perivascular |
| Superficial and Deep Perivascular |
| Lichenoid |
| Confluent and Diffuse |
| Intraepithelial Lymphocytes | Epidermotropism with or without Pautrier’s microabscesses | Qualitative, nominal and dichotomic | Lymphocytes aligned along the basal layer and upper, in the epidermis, isolated, with halo. Pautrier’s microabscesses: cluster of at least 4 atypical lymphocytes inside the epidermis.[16] |
| Folliculotropism without mucinosis |
| Folliculotropism, equivalent to epidermotropism, but inherent to the epithelium of the hair follicle. |
| Lymphoid Atypia | Convolution of the lymphocyte nucleus in the epidermis and/or dermisIncrease of the size of the lymphocytes nuclei, also in the epidermis and/or dermis | Qualitative, nominal and dichotomic | Lymphoid atypia criteria follow the diagnostic algorithm.[6]Lymphoid nucleus were considered increased when equal or greater than the nuclei of the basal keratinocytes.[17] |
| **Clinical Variables** | **Classification** | **Definitions** |
| Gender | Qualitative, nominal and dichotomic | Male or female |
| Age at time of diagnosis | Quantitative, continuous manner | Years |
| Evolution period | Quantitative, continuous manner | Months |
| Elementary lesion | Qualitative, nominal and dichotomic | Macules or plaques, According to its predominant |
| Number of lesions | Qualitative, nominal and dichotomic | Single or multiple lesions |
| Variation of size and form of the lesions | Qualitative, nominal and dichotomic |  |
| Topography of the lesions | Qualitative, nominal and dichotomic | Predominance between non-photoexposed and photoexposed areas |
| Poikiloderma | Qualitative, nominal and dichotomic | Identification of dyschromia with mottled aspect, telangiectasia and epidermal atrophy.[6] |
| TNMB staging | Qualitative, nominal and dichotomic | IA or IB.[9] |
| Disease follow-up period | Quantitative, continuous manner | Years |
| **Immunohistochemical variables** | **Classification** | **Definitions** |
| Positivity of CD2 | Discrete quantitative analysis | Markers were measured in terms of percentage for total lesional infiltrate. The loss of <50% for CD2+, CD3+ and/or CD5+ T-cells and <10% for CD7+ T-cellswere considered.  |
| Positivity of CD3 |
| Positivity of CD5 |
| Positivity of CD7 |
| Dermoepidermal disagreement | Qualitative, nominal and dichotomic | Positivity difference between epidermal and dermal lymphocytes.[6] |

**Table 2** Results of the immunohistochemical analysis as part of the aplication of the diagnostic algorhythm of Pimpinelli et al.

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Case** | **CD3****Epi/Derm** | **%** | **CD2****Epi/Derm** | **%** | **CD5****Epi/Derm** | **%** | **CD7****Epi/Derm** | **%** | **Pt.** |
| 1 | Pos/Pos | 80 | Neg/Pos | 10 | Neg/Pos | 20 | ‒ | 0 | 1 |
| 2 | Pos/Pos | 90 | Neg/Pos | 10 | Neg/Pos | 70 | ‒ | 0 | 1 |
| 3 | Pos/Pos | 80 | Neg/Pos | 10 | Pos/Pos | 20 | ‒ | 0 | 1 |
| 4 | Pos/Pos | 95 | Neg/Pos | 10 | Pos/Pos | 30 | ‒ | 0 | 1 |
| 5 | Neg/Pos | 90 | Neg/Pos | 10 | Neg/Pos | 10 | ‒ | 0 | 1 |
| 6 | Neg/Pos | 90 | Neg/Pos | 5 | Neg/Pos | 30 | ‒ | 0 | 1 |
| 7 | Pos/Pos | 95 | ‒ | 0 | Pos/Pos | 80 | Pos/Pos | 70 | 1 |
| 8 | Neg/Pos | 40 | ‒ | 0 | Neg/Pos | 10 | ‒ | 0 | 1 |
| 9 | Neg/Pos | 90 | Neg/Pos | 50 | ‒ | 0 | ‒ | 0 | 1 |
| 10 | Neg/Pos | 90 | Neg/Pos | 50 | ‒ | 0 | ‒ | 0 | 1 |
| 11 | Neg/Pos | 30 | Neg/Pos | 5 | Neg/Pos | 10 | Neg/Pos | 30 | 1 |
| 12 | Neg/Pos | 80 | ‒ | 0 | ‒ | 0 | ‒ | 0 | 1 |
| 13 | Pos/Pos | 90 | Neg/Pos | 20 | Pos/Pos | 50 | ‒ | 60 | 1 |
| 14 | Neg/Pos | 90 | ‒ | 0 | Neg/Pos | 20 | Neg/Pos | 40 | 1 |
| 15 | Pos/Pos | 90 | ‒ | 0 | Neg/Pos | 20 | ‒ | 0 | 1 |
| 16 | Pos/Pos | 90 | ‒ | 0 | Neg/Pos | 20 | ‒ | 0 | 1 |
| 17 | Pos/Pos | 80 | Neg/Pos | 10 | Neg/Pos | 5 | ‒ | 0 | 1 |
| 18 | Pos/Pos | 90 | ‒ | 0 | Neg/Pos | 90 | Neg/Pos | 20 | 1 |
| 19 | Pos/Pos | 95 | ‒ | 0 | Neg/Pos | 10 | Pos/Pos | 90 | 1 |
| 20 | Pos/Pos | 95 | ‒ | 0 | Neg/Pos | 80 | Neg/Pos | 50 | 1 |
| 21 | Neg/Pos | 10 | ‒ | 0 | ‒ | 0 | Neg/Pos | 10 | 0 |
| 22 | Neg/Pos | 90 | ‒ | 0 | Neg/Pos | 40 | Neg/Pos | 90 | 1 |
| 23 | Neg/Pos | 50 | ‒ | 0 | Neg/Pos | 5 | Neg/Pos | 20 | 1 |

Epi., Epidermis; Derm., Dermis; Neg., Negative; Pos., Positive; Pt., Points, according to the algorithm analysis.

**Table 3** Immunohistochemical criteria, according to the proposed algorithm.

|  |  |  |
| --- | --- | --- |
| **< 50% positive T CD3 cells**  | 13.0% | 03/23 |
| **< 50% positive T CD2 cells**  | 91.3% | 21/23 |
| **< 50% positive T CD5 cells**  | 78.2% | 18/23 |
| **< 10% positive T CD7 cells**  | 56.5% | 13/23 |
| **Dermoepidermal disagreement**  | 52.1% | 12/23 |

An overlap of criteria may occur, however, as proposed in the algorithm; the maximum score within the immunohistochemical criteria is 1 (one).