The pigmented hairy nevus was first described by Alibert in 1832 and Rokitansky in 1861. It is a very characteristic condition which consists of a dark-colored patch of skin wherein smaller patches with thick hairs and differently composed nodules can be found.

They can already be identified during the first or second year of life but sometimes they appear later, after several years. They are usually rounded or oval patches whose surface greatly varies from smooth, to irregular, wart-like, cerebriform or lobed.
Congenital nevus can be different in size. In order to be considered big (the so called giant nevus) the patch must be over 20 cm in its greatest diameter once adulthood is achieved, therefore considering standard sizes: a patch as big as a palm for nevi located in your face or neck, or twice that size for other anatomical locations, or 30% of the body surface; other standards establish a diameter over 20 cm long \(^2\).

Prevalence is similar among men and women. They appear in all races, with an incidence of 1 in every 100 births for small nevi and 1 in every 200 births for giant nevi \(^3\).

Traditionally it was considered that these nevi did not become malignant. Nevertheless, it has been proven that they can eventually turn into malignant melanoma. The relationship between melanoma and giant nevomelanocytic nevi is well reported and the risk of developing a melanoma is proportional to the size of the nevus, with an increased risk for those patients with nevi affecting more than 5% of the body surface \(^4,5\).

The treatment mostly depends on the size, the localization and the potential of malignization of the condition (changes in size, skin or subcutaneous nodules with very dark pigmentation, itching, pain, bleeding or ulceration). Generally speaking, surgical treatment is usually needed and it includes the removal of the lesion, skin grafting for reconstruction, tissue expansion, rotation of local flaps and free tissue expansion.

The case we report belongs to a 29 year old Romanian woman who was admitted to our facility after a 2 month stay in our country and who stated to pursue surgery for cosmetic reasons.

She has a congenital giant pigmented hairy nevus affecting her whole back, right hemi-thorax and hemi-abdomen as well as left anterior hemi-abdomen, along with small satellite nevi on her arms and legs.

She was assessed by the Dermatology department in our reference hospital (Hospital General de Castellón) where they recommended that she be transferred to a first level hospital for surgical removal. The hospital she was referred to was the Hospital de la Fe in Valencia.

Required procedures for her transfer were carried out and she was discharged before it took place, losing contact and track of her situation.

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