Pigmented purpuric dermatosis with cyclic occurrence to menstrual cycle

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Pigmented purpuric dermatoses (PPD) are a group of disorders characterized by a distinct purpuric rash, mainly localized to the lower limbs. The etiology is unknown but they tend to share similar histological findings. A 25-year-old woman presented with a 2-year history of asymptomatic skin rash on her lower extremities. The physical examination revealed irregular shaped orange-brown colored patches with some scattered petechiae on her thighs. She told the rash aggravated a few days before menstruation. She denied taking any medication including oral contraceptives. A skin biopsy taken from the thigh showed perivascular infiltrates of lymphocytes, and numerous areas of red cell extravasation with abundant hemosiderin. The specimen showed no immunoreactivity to estrogen receptor and progesterone receptor. By clinical and histological findings, we concluded the diagnosis of PPD with cyclic occurrence during luteal phase of menstrual cycle, possibly by progesterone. The skin lesion improved by topical steroid and topical tacrolimus. We report this rare case of PPD suggesting endogenous progesterone can play some role in development of PPD.

키워드: Pigmented purpuric dermatoses, Menstruation, progesterone

Extensive pigmented purpuric dermatosis in a linear pattern successfully treated with pentoxifylline

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Pigmented purpuric dermatoses (PPDs) are a group of chronic and relapsing dermatoses characterized by petechiae, pigmentation, and occasionally, telangiectasia, mainly localized to the lower limbs, which are morphologically different but histopathologically indistinguishable. The cause of PPDs is largely unknown. These dermatoses share common histopathologic features with perivascular lymphocyte infiltration, erythrocyte extravasation, and hemosiderin deposition. Although subclassification has been performed to account for the clinical variations between PPDs, frequent overlap may make differentiation difficult. We describe 2 patients with PPD with extensive cutaneous involvement of both arms and legs in a linear distribution, which was initially considered angioma serpiginosum. To the best of our knowledge, extensive PPD involving all extremities in a linear distribution has not been reported previously. Our cases are notable for their extensive linear cutaneous involvement, which showed good response to pentoxifylline. These cases illustrate that PPD should be considered in the differential diagnosis of a linear pigmentary disorder involving all extremities.

키워드: Extensive, Pentoxifylline, Pigmented purpuric dermatosis, Linear distribution

Livedoid vasculitis with homocysteinemia successfully treated with folic acid

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Livedoid vasculitis is a painful ulcerative condition affecting the legs that is often difficult to treat. We report herein a case of livedoid vasculitis with homocysteinemia, which showed very unusual clinical and histopathologic manifestations, and successfully managed by oral folic acid therapy. A 39-year-old man visited the department of dermatology with one year history of dark brown to purple-colored patches and some ulcerations on the both lower legs, and he had diagnosed homocysteinemia with methylene tetrahydrofolate reductase (MTHFR) mutation, previously. The histopathologic findings revealed dense superficial, deep perivascular and perifollicular infiltrate of lymphocytes with fibrin deposition within the wall and lumen of the vessels in dermis. On the basis of clinical and pathological findings, he was diagnosed as livedoid vasculitis with homocysteinemia. There was no response of conventional treatment for livedoid vasculitis. After the treatment of oral folic acid 1mg daily for 1 month, however, the skin lesions were improved without recurrence and side effect.