



Case 1

A five-year-old girl presents with multiple, asymptomatic, flesh-coloured nodules on the medial aspect of the left ankle.

What is the diagnosis?

Subcutaneous granuloma annulare.

What is the treatment?

Subcutaneous granuloma annulare occurs predominantly in children and young adults. The lesions usually appear as asymptomatic deep dermal or subcutaneous nodules with no overlying epidermal change. Histologically, the lesions consist of a granuloma with a central area of necrotic collagen, mucin deposition, and a peripheral infiltration of lymphocytes, histiocytes, and giant cells. Affected children are usually healthy. Lesions are usually self-limited. Approximately 75% of lesions disappear within two years. A potent topical corticosteroid preparation or intralesional corticosteroid may hasten involution.

Provided by Dr. Alexander K.C. Leung and Dr. Alexander G. Leong, Calgary, Alberta.

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Case 2

A 56-year-old man has been treated previously because his tanque cancer developed skin changes over the right side of his neck.

What is the diagnosis?

Chronic X-ray dermatitis is defined as irreversible skin changes resulting from brief or prolonged, intense, repeated exposure to radiation.

What is the treatment?

Changes are permanent, and aggressive squamous cell carcinoma may develop. The area should be excised and grafted, if possible. If there is mild or moderate damage, the area should be carefully followed for malignancy.

Provided by Dr. Jerzy Pawlak, Winnipeg, Manitoba.

CME Congress 2004: you belong in Toronto

May 15-18, 2004 at the Fairmont Royal York Hotel, in Toronto, Canada

This Congress is sponsored by the Alliance for Continuing Medical Education, the Society for Academic Continuing Medical Education, and the Association for Hospital Medical Education, and is hosted by the University of Toronto, in association with the Canadian Association for Continuing Health Education.

- Information:** **Rajesh Mangrulkar**, MD, University of Michigan, Ann Arbor, Michigan, "On targeting and structuring information resource use - a path towards informed clinical decisions."
- Education:** **Karen Mann**, PhD, Dalhousie University, Halifax, Nova Scotia, "The role of educational theory in CME - has it helped us?"
- Implementation:** **Jeremy Grimshaw**, MB, ChB, PhD, University of Ottawa, Ontario, "Changing physician behaviour in the real world: lessons from guideline implementation."
- Regulation:** **Donald E. Melnick**, MD, President, National Board of Medical Examiners, Pennsylvania, will speak on "Physician performance assessment in the next few years and how it will affect CME."
- Environment:** **Mark Smith**, MD, MBA, President and CEO of the California Health Care Foundation, Sacramento, California, will be speaking on "The future of health care; the future of CME."

Who Should Attend? The relevant and multifaceted nature of the Congress themes will appeal to a broad range of individuals from the United States, Canada, and internationally, including CME planners, health services researchers, policy-makers, leaders in organized medicine, physicians and other health care professionals, quality improvement professionals, and health educators.

How Do I register? The CME Congress 2004 website <http://www.cmecongress.org> provides more detailed information about the program, speakers, submission of poster presentations, registration, accreditation, sponsors, etc. The final program will be available by February 1st 2004. Please refer to this site or contact the organizers at:

Email: ca.med@utoronto.ca

Telephone: 416-978-2719 Toll-Free: 1-888-512-8173 Fax: 416-971-2200





Case 3

A 23-year-old man has a mole on his right forearm, which he says has been there as long as he can remember. During the last few days he has noticed a pale area of skin around the mole.

What is the diagnosis?

Halo nevus, which is a benign lesion involving a central mole surrounded by a halo of depigmented skin.

What is the treatment?

Halo may repigment with time or the nevus may disappear. Removal of a halo nevus is unnecessary unless the nevus has atypical features.

Provided by Dr. Jerzy Pawlak and Dr. E. Sochocke, Winnipeg, Manitoba.

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