



Case 1

Worrying About White Patches

The mother of this 12-year-old girl is distressed by the white patches on her daughter's face.

What do you suspect?

- a. Eczema
- b. Vitiligo
- c. Pityriasis versicolour
- d. Fungus infection
- e. Pityriasis alba

Answer

Pityriasis alba (answer e) is characterized by multiple small, ill-defined patches, usually on the cheeks.

The areas are hypopigmented with a fine scale and their appearance is most striking in dark-skinned individuals.

Pityriasis alba most commonly involves young adolescents and lasts months or years before clearing around puberty.



The cause of this condition is unclear, but it is more common in children with atopic dermatitis.

There is no effective treatment, but emollients reduce the scale and visibility.

Stanley Wine, MD, FRCPC, is a dermatologist, Toronto, Ontario.

This month—4 cases:

1. *Worrying About White Patches*
2. *"This rash won't clear!"*
3. *"My lesion is bleeding!"*
4. *"Doc, stop these spreading spots!"*



Case 2

“This rash won’t clear!”

This 19-year-old woman has had a rash on her forehead for one year.

What is it?

- a. Acne
- b. Sebaceous hyperplasia
- c. Flat warts
- d. Lichen planus
- e. Reaction to shampoo

Answer

Flat warts (answer c) are due to the human papillomavirus type 3. The warts are more common in children and young adults.

They have a smooth surface, often appearing in a linear or grouped pattern.

Flat warts are usually located:

- on the face, where they may appear skin-coloured or pink or
- on the dorsa of the hands, where they may appear darker in colour.



As with common warts, they disappear over time; therefore, caution should be taken with any treatment. Light liquid nitrogen and topical retinoids are often used.

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Case 3

“My lesion is bleeding!”

This 72-year-old man has had an enlarging lesion on his shoulder for several years. He has declined treatment until the lesion’s recent bleeding.

What is your diagnosis?

- a. Pigmented basal cell carcinoma
- b. Dermal nevus
- c. Nodular melanoma
- d. Dermatofibroma
- e. Hemorrhage in an epidermal cyst

Answer

The appearance of this *basal cell* (**answer a**) is due to the abundance of melanin present in the tumour cells.

Pigmented lesions, such as this basal cell, must be biopsied to exclude a melanoma. Once confirmed, the lesion should be excised or deeply curetted.



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Case 4

“Doc, stop these spreading spots!”

A 30-year-old landscaper has noted white spots on his fingers over the past year. Recently, a few spots have appeared on his face.

What do you think?

- a. Reaction to plants
- b. Leprosy
- c. Chemical reaction
- d. Vitiligo
- e. Due to local trauma

Answer

Vitiligo (**answer d**) is an acquired idiopathic disorder where there is an absence of functional melanocytes.

The average age of onset is 20 years.

Areas most commonly involved are the:

- face,
- dorsa of the hands,
- shins,
- axilla,
- naval and
- anogenital areas.



Areas of involvement are usually milky white with a convex border and vary in size and rate of the spread.

Treatment of vitiligo is difficult and recurrences are common.

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Stanley Wine, MD, FRCPC, is a dermatologist, Toronto, Ontario.