

## Patches on Legs

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A 43-year-old obese female complains of asymptomatic reddish-brown patches on her ankles and lower legs of six months duration. She is currently on no medications, except for some vitamins and herbal remedies.

### What is your diagnosis?

- Nummular eczema
- Tinea corporis
- Psoriasis
- Granuloma annulare
- Venous stasis dermatitis

### Answer

Granuloma annulare (GA) (answer d) is a benign, relatively common inflammatory skin condition that can affect all age groups but is uncommon in infancy. It is characterized by annular plaques (raised borders, central clearing) and/or dermal papules. The etiology is uncertain; although, the immune system is involved. There is no racial, geographic or ethnic predilection, although it is more common in women. There are different subtypes, including localized (most common), generalized (adults), subcutaneous (children), perforating (rare), and arcuate dermal erythema (rare). Most lesions present for no identifiable reason, and go away for no apparent reason.



Figure 1: Patches on Legs

The diagnosis is made clinically in many cases; although, a biopsy can be helpful when in doubt or with unusual presentations. Laboratory or imaging studies are seldom required. Localized lesions are typically treated with intralesional triamcinolone acetonide and sometimes with potent topical steroids and/or liquid nitrogen cryotherapy. Generalized GA can be treated with phototherapy and sometimes oral retinoids (e.g., isotretinoin).

**CME**

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