

## Richard's Rash

Stanley J. Wine, MD, FRCPC

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### Meet Richard

This 30-year-old man had a period of malaise followed by a progressively sore throat and lesions on his palms and soles.



### What is your diagnosis?

- a) Contact dermatitis
- b) Urticaria
- c) Hand, foot, and mouth disease
- d) Psoriasis
- e) Shingles

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See page 2 for the answer to last month's case 



## Here is the answer to last month's case

### Meet George

- This 70-year-old man presents with an evolving, asymptomatic eruption on his lower legs that has been present for three years
- He is on medication for diabetes and high blood pressure



### What is your diagnosis?

- |                   |                        |                      |
|-------------------|------------------------|----------------------|
| a) Drug eruption  | c) Kaposi's sarcoma    | e) Mycosis fungoides |
| b) Benign purpura | d) Diabetic dermopathy |                      |

### Answer: B

There are several different variations of benign purpura (**answer b**), which is more correctly referred to as chronic, pigmented purpura.

Chronic, pigmented purpura presents with petechial hemorrhage, as demonstrated in the above photo. It is not associated with systemic disease and is asymptomatic.

This is due to minimal inflammation in the capillaries of the superficial papilla and secondary hemorrhage. While it can be seen in childhood, it is much more common on the lower legs of the elderly — most often in men.

Pigmented purpura typically presents with yellow-brown, oval to irregular patches with pinpoint cayenne pepper petechiae.

With time, lesions may fade or become darker, and, at times, they may slowly expand in coverage

Since this is a capillaritis, topical steroids were applied, but had minimal success.

Investigation is usually not necessary for this chronic presentation.

**Stanley J. Wine, MD, FRCPC**

*cme*

### Congratulations

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