Case 1
A 67-year-old man had surgery on the chest two years ago after significant weight loss and night sweats.

Questions
1. What is the diagnosis?
2. What factors can increase the risk for this condition?
3. How common is this condition?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

Case 2
An eight-month-old girl had atopic dermatitis. Her mother was concerned because of the discolouration on the child’s cheeks after a topical cream had been applied for a month.

Questions
1. What is the diagnosis?
2. What is the underlying cause?

Provided by Dr. Alexander K.C. Leung and Dr. Justine H.S. Fong, Calgary, Alberta.
**Case 3**

A 68-year-old woman presented with lower back pain and tenderness over her lumbar spine. A computed tomography (CT) scan of the lumbar spine was performed.

**Question**

1. What does the CT scan show?

Provided by Dr. J.K. Pawlak, Winnipeg, Manitoba.

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**Case 4**

A 64-year-old man presented with scattered tense bullae on an erythematous base on the chest, back, arms, and groin.

**Questions**

1. What is the diagnosis?
2. What kind of disease is this?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

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**Case 5**

The mother of this seven-month-old infant is concerned about the shape of the infant’s head.

**Questions**

1. What is the abnormality?
2. What is the significance?

Provided by Dr. Alexander K.C. Leung and Dr. C. Pion Kao, Calgary, Alberta.

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**ANSWERS ON PAGE 52**

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Case 6
A 24-year-old man presented with a painful, superficial ulceration in the sulcus. He had multiple sexual partners and did not use a condom. He did not have any history of cold sore infection.

Questions
1. What is the most likely diagnosis?
2. How can we confirm the diagnosis?
3. What kind of treatment is required?

Provided by Dr. J.K. Pawlak, Winnipeg, Manitoba.

Case 7
A 47-year-old woman was complaining of pain at the back of her foot when wearing shoes.

Questions
1. What is the diagnosis?
2. What is the treatment?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

Case 8
An eight-year-old boy was noted to have hypopigmentation on the left side of the body.

Questions
1. What is the diagnosis?
2. What is the significance?

Provided by Dr. Alexander K.C. Leung and Dr. Justine H.S. Fong, Calgary, Alberta.

ANSWERS ON PAGE 52
Case 9
A 59-year-old man presented with skin thickening with areas of bumpy appearance and dark brown hyperpigmentation over his right medial malleolus.

Question
1. What is the diagnosis?
2. What is dyschromia?

Provided by Dr. Jerzy Pawlak and Dr. T.J. Kroczak, Winnipeg, Manitoba.

Case 10
A 21-year-old female waitress presented with a pruritic, fissured right hand.

Questions
1. What is the diagnosis?
2. What are the high-risk occupations for this condition?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

Case 11
A 42-year-old woman presented with difficulty rising from a seated position and violaceous papules and plaques on her metacarpophalangeal, proximal interphalangeal, and distal interphalangeal joints, as well as on her elbows and knees.

Questions
1. What is the sign in evidence in the photo?
2. What is the diagnosis?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

ANSWERS ON PAGE 52/53
Case 12
A 15-year-old girl presented with abdominal pain. Physical examination revealed a mass in the right lower quadrant of the abdomen.

Questions
1. What is the diagnosis?
2. What are the complications?

Provided by Dr. Alexander K.C. Leung and Dr. Andrew L. Wong, Calgary, Alberta.

Case 13
A 12-year-old girl developed left peri-tonsilar abscess.

Question
1. In which of the following situations may this lead to an inflammation of peritonsilar abscess?
   a) When it is bilateral.
   b) When it presents in childhood.
   c) When it is associated with high fever.
   d) When there is fresh bleeding.

Provided by Dr. Jerzy Pawlak and Dr. T.J. Kroczak, Winnipeg, Manitoba.

Case 14
A 58-year-old woman presented with non-tender nodules on her distal phalangeal joints.

Questions
1. What is the name of this lesion?
2. In what condition do you find this lesion?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

ANSWERS ON PAGE 53
Case 15
A 43-year-old man presented with a one-week history of a very painful distal phalanx of the middle finger.

Questions
1. What is the diagnosis?
2. What is the cause of this problem?
3. Is this lesion normally painful?

Provided by Dr. Benjamin Barankin, Edmonton, Alberta.

Case 16
A six-year-old girl was noted to have a painless, soft swelling in the floor of the mouth.

Questions
1. What is the diagnosis?
2. What is the treatment?

Provided by Dr. Alexander K.C. Leung and Dr. C. Pion Kao, Calgary, Alberta.

ANSWERS ON PAGE 53
**Answers**

**Case 1**
1. This picture shows a male patient post-mastectomy for breast cancer.
2. Radiation exposure, high levels of estrogen, and a family history of breast cancer can affect a man’s risk of developing breast cancer.
3. Male breast cancer makes up less than 1% of all cases of breast cancer and is most common in men between the ages of 60 and 70.

**Case 2**
1. Facial telangiectasia.
2. The telangiectasia is steroid-induced.

**Case 3**
1. The CT scan of the lumbar spine showed a fracture in L2 associated with a soft tissue mass on her right side. The patient was diagnosed as having large-cell carcinoma of the lung with metastases to the lumbar spine and pathologic fracture of the L2 vertebrae.

**Case 4**
1. Bullous pemphigoid.
2. A chronic, autoimmune, subepidermal, blisterring skin disease that rarely involves mucous membranes and primarily affects the elderly.

**Case 5**
1. Flat occiput.
2. A flat occiput is often a normal finding in healthy children and may be due to prolonged sleeping in the supine position without pillows. The condition is also seen more frequently in children with Down’s syndrome, Apert syndrome, Carpenter syndrome, and Zellweger syndrome.

**Case 6**
1. Primary episode of genital herpes, herpes simplex virus (HSV)-2.
2. The viral culture of the lesion was positive for HSV-2 and the type-specific serology was negative for HSV-1 and HSV-2.
3. The patient should be treated with antiviral therapy.

**Case 7**
1. Calcaneal bursitis.
2. The treatment options include: changing footwear; gradually progressive stretching of the Achilles tendon; icing the posterior heel and ankle to reduce inflammation and pain; corticosteroid injection if the practitioner is skilled; or surgery, if medical measures fail.

**Case 8**
1. Segmental vitiligo.
2. Segmental vitiligo is characterized by complete loss of pigmentation limited to a segmented, quasidermatomal area of the skin. Unlike generalized vitiligo, segmental vitiligo is not associated with other autoimmune diseases.

**Case 9**
1. Stasis dermatitis.
2. Dyschromia may be composed of melanin, hemosiderin, or foreign pigments. It appears at any skin layer and may be of any size. It is important to determine whether a brown or black colour is due to the presence of melanin or hemosiderin. Whitening diseases, such as vitiligo, are also considered dyschromias.
## Answers

### Case 10
1. Hand eczema.
2. Cleaning, hospital care, food preparation, and hairdressing.

### Case 11
1. Gottron’s sign.
2. Dermatomyositis.

### Case 12
1. Ovarian cyst.
2. Potential complications include torsion, hemorrhage, and rupture of the cyst.

### Case 13
1. d—When there is fresh bleeding.

### Case 14
1. Heberden’s nodes.
2. Heberden’s nodes are found in patient’s with osteoarthritis—the most common joint disease. The nodes represent palpable osteophytes of the distal interphalangeal joint and are much more common in women.

### Case 15
1. Herpetic whitlow.
2. Herpes simplex virus (HSV)-1 is the cause in about 60% of cases and HSV-2 is the cause of the remaining 40%.
3. It is an intensely painful infection.

### Case 16
1. A ranula is a retention cyst associated with a major salivary gland in the sublingual area.
2. The cyst should be excised and the severed salivary duct brought to the exterior. Dx

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**In the June 2003 issue, the case description for Case 6 referred to the patient as a girl. In fact, this was a photo of a boy. We apologize to our readers.**

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