"Is this plaque dangerous?"

Benjamin Barankin, MD

A 33-year-old woman presented with a onemonth history of an erythematous, scaly plaque on her forehead (Figure 1). The lesion was asymptomatic and the patient felt well. Serologic screen for complete blood count, creatinine, alanine transferase, and antinuclear antibody were all negative.

1. What is the most likely diagnosis?

- a) Squamous cell carcinoma
- b) Tinea corporis
- c) Eczema
- d) Discoid lupus erythematosus
- e) Granuloma annulare

2. What is the main concern with this lesion?

- a) Local scarring
- b) Metastasis
- c) Local spread
- d) Risk for impetigo
- e) Significant risk for systemic problems

3. How could you treat this lesion?

- a) Cryotherapy
- b) Potent topical steroids
- c) Excision
- d) Topical antifungal agent
- e) Prednisone D



Figure 1. Erythematous, scaly plaque on the forehead.

Dr. Barankin is a dermatology resident, University of Alberta, Edmonton, Alberta.

"Case in Point" is a series of interesting cases and diagnoses for general practitioners to sharpen their skills. Submissions and feedback can be sent to **diagnosis@sta.ca**.

Answers: 1-d ; 2-a; 3-b