



# Multiple Pruritic Papules

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A 33-year-old male presents with numerous pruritic papules on his wrists, shins and ankles. The patient finds the rash very bothersome and recently has difficulty sleeping. He takes occasional migraine medications and has no drug allergies.

## 1. What is the most likely diagnosis?

- Pityriasis rosea
- Lichen simplex chronicus
- Lichen planus
- Psoriasis
- Papular urticaria

## 2. Which of the following are variants of this condition?

- Hypertrophic type
- Erosive type
- Actinic type
- Annular type
- All of the above

## 3. How could you manage this condition?

- Ultra potent topical steroids
- Oral metronidazole
- Oral retinoids
- Intralesional triamcinolone acetonide
- All of the above


Lichen planus (LP) is a pruritic papulosquamous disease of planar, polygonal and purple/violaceous papules (5 Ps). It prefers the flexor surfaces of the arms, shins and ankles, the genitalia and oral mucosa (lacy white “Wickham striae”). It appears



Figure 1. Numerous pruritic papules on the shins.

to be an idiopathic immunologically-mediated inflammatory disorder. Different variants exist, which have different presentations and symptomatology. Hypertrophic LP (as in this case) is particularly pruritic and often affects the shins.

The clinical presentation of LP includes several variants: actinic, annular, atrophic, erosive, follicular, guttate, hypertrophic, linear and vesicular. The diagnosis of LP is often clinical, although histopathology may be required to confirm the diagnosis.

LP is a self-limited condition that usually resolves within one year. Mild cases can be treated symptomatically with antihistamines and potent topical steroids. More severe cases, especially those affecting the scalp, nails and mucous membranes often require more intensive therapy from a dermatologist. 

Answers: 1-c; 2-e; 3-e

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