

A Case of Erythema Dyschromicum Perstans

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Case Presentation

A 66-year-old male presented with pigmented lesions that he had for a few months. Diagnosis of erythema dyschromicum perstans was made based on clinical appearance (asymptomatic, blue-grayish patches of varying sizes, some with erythematous borders, distributed on the face, arms, shoulders and trunk) (Figure 1 A-D), histopathology (atrophic epidermis, superficial and perivascular lymphocytic infiltrate and pigment incontinence in the dermis) (Figure 1E) and dermoscopy (gray-bluish small dots over a bluish base) (Figure 1F).

Teaching points

In everyday practice and for every skin lesion, the use of dermoscopy as a supportive tool is highly recommended. In a case of erythema dyschromicum perstans (EDP), there are

significant clinical, histological and dermoscopic similarities between EDP and other acquired dermal macular hyperpigmentations-pigmented contact dermatitis and lichen planus pigmentosus [1]. Viney et al reported that severity of pigmentation by dermoscopy is comparable with severity of clinical and histological findings but there are no specific dermoscopic differences to differentiate these diseases [1,2]. Four dermoscopic grades were observed: 1) discrete pigment dots without any pattern; 2) pigment dots and globules arranged in broken net pattern; 3) pigment dots and globules in a well-formed net-like pattern and 4) diffuse pigment dots, globules and blotches, sparing only gland openings [1]. According to the given classification, first grade corresponds to our case. Presence of dots, globules and blotches in EDP differs from other hyperpigmentations, such as melasma where pseudo-reticular network is observed or in the case of nevus Ota where slate-gray structureless areas are present [1].

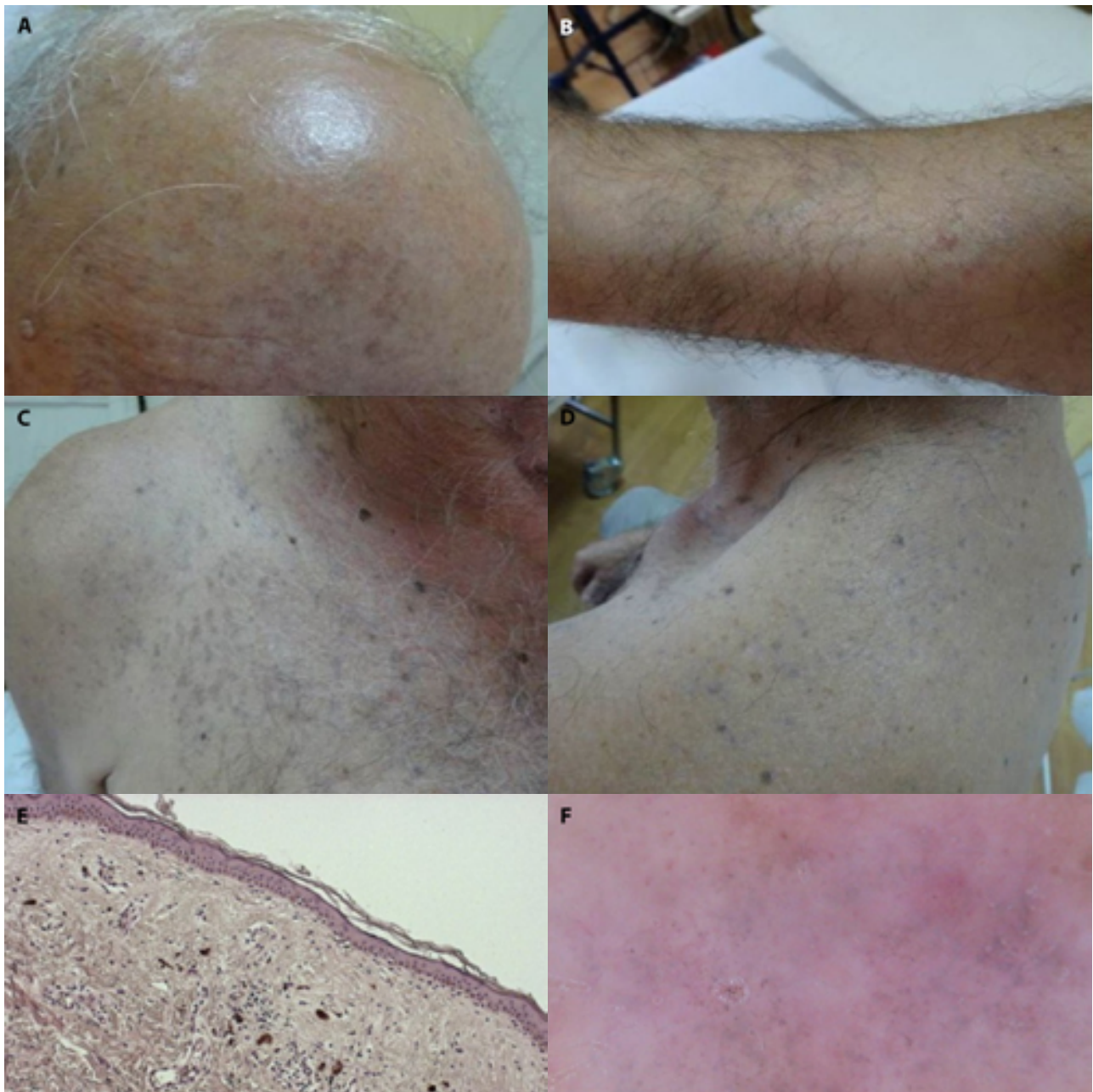


Figure 1. (A- D). Blue-grayish patches of varying sizes, some with erythematous borders localized on the face, arms, shoulders and trunk. (E) Atrophic epidermis, superficial and perivascular lymphocytic infiltrate and pigment incontinence in the dermis (H&E x100). (F) Dermoscopic image: gray-bluish small dots over a bluish base (Dermatoscope Heine Delta 20 Led Plus).

References

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