

>>DIAGNOSIS AT A GLANCE

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CASE 1



A 46-year-old man presents with a nonhealing lesion of his scrotum that he first noted approximately 2 months ago. He reports no localized pain or tenderness, although the lesion bleeds infrequently. He is a nonsmoker, takes no medications, drinks socially, and denies recent weight loss. Examination reveals a 1-cm bluish black growth. Inguinal lymph nodes are nonpalpable, and the remainder of the cutaneous examination is unremarkable. A nodular malignant melanoma is suspected clinically, and a biopsy is obtained.

What is your diagnosis?

CASE 2



A 16-year-old Hispanic female seeks consultation for a rash that has developed around her mouth. The eruption first appeared about 2 weeks ago, shortly after the patient used an OTC depilatory agent. The rash has worsened despite recent applications of topical neomycin ointment. She reports pruritus and occasional burning. Examination reveals erythema, hyperpigmentation, and excoriation of the skin around the corners of the patient's mouth. The remainder of the skin exam is normal.

What is your diagnosis?

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CASE 1



In preparation for the biopsy, it was noted that the hyperpigmented surface was in fact an eschar. This was readily removed with light pressure, and a slightly erythematous, indurated plaque was revealed. Histopathologic studies demonstrated a poorly differentiated adenocarcinoma, and multiple visceral metastases were noted on PET (positron emission tomography). Despite undergoing chemotherapy, the patient died 6 months later. Uncommonly, cutaneous metastases predate the diagnosis of a primary internal malignancy, and at times the anatomic site of origin remains unidentified despite intensive workup. Cancers of the breast, lung, gastrointestinal tract, and kidney are most frequently associated with metastatic spread to the skin. Prognosis is generally poor.

CASE 2



An allergic contact dermatitis to both the depilatory agent and neomycin was suspected. The patient was advised to discontinue use of both products, and a medium-potency topical steroid was prescribed. She returned for follow-up in 10 days, at which time the condition had improved about 75%. Therapy was changed to 1% hydrocortisone cream. The patient was instructed to return for patch testing if the dermatitis recurred. Sensitizing compounds in depilatory agents include thioglycolate and fragrances. Neomycin was named the 2010 Allergen of the Year by the American Contact Dermatitis Society.

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