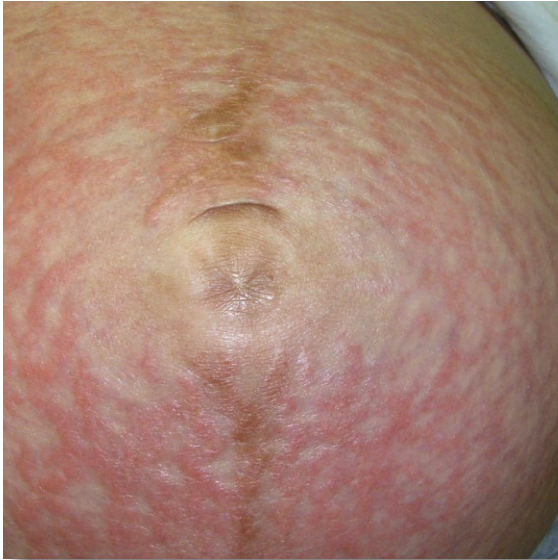


DERM DILEMMA

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CASE 1



A 32-year-old pregnant woman presents to your urgent care center with a severely pruritic abdominal rash of 3 days' duration. This is her first pregnancy, and her due date is in 3 weeks. Ultrasonography has indicated twin gestation. The rash initially appeared on the striae of her abdomen and has been spreading. A dermatology consult is ordered, and a skin biopsy is performed.

What is your diagnosis?

CASE 2



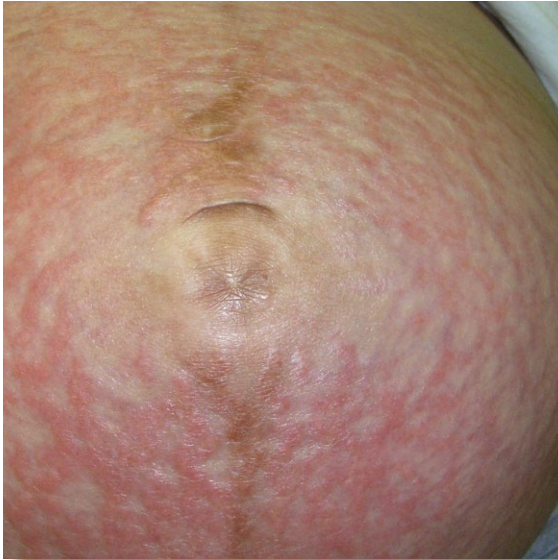
A 76-year-old woman presents with an erythematous, painful dermatitis involving the corners of her mouth. She reports that she drools at night and the corners of her mouth are moist on awakening. With the aging process, she has noted changes in her bite. Cultures of the corners of her mouth are obtained for yeast and viral infections. She is referred to a dermatologist.

What is your diagnosis?

Turn page for answers

DERM DILEMMA

CASE 1



The patient has pruritic urticarial papules and plaques of pregnancy (PUPPP). This syndrome generally occurs in primiparous patients during the third trimester. The rash starts on the abdomen and spreads to the chest, back, and extremities. It is very pruritic and resolves spontaneously after delivery. In general, the condition is not associated with increased maternal or fetal risks. The rash is managed with antihistamines, mild topical steroids and, in severe cases, oral steroids. Therapeutic management should be approved by the obstetrician.

CASE 2



The patient has perleche, also known as angular cheilitis. This condition is common in older persons who have experienced changes in their bite, resulting in collection of moisture in the corners of the mouth. This condition is also noted in HIV-positive patients. Chronic moisture in the corners of the mouth predisposes to chronic irritation and secondary yeast infection. Affected patients benefit by periodically patting the corners of the mouth dry and applying ketoconazole cream twice daily.

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