

DERM DILEMMA

Mark Bechtel, MD
Matthew Zirwas, MD

CASE 1



A 36-year-old white man presents to your urgent care center with a weeping erythematous penile rash of 2 months' duration. He reports pruritus and some dysuria. A rust-colored stain is noted on his underwear. He has not been circumcised and has difficulty with penile hygiene. Physical exam demonstrates moist erythematous patches on the ventral surface of the glans and shaft of the penis.

What is your diagnosis?

CASE 2



A 42-year-old African American woman presents to your urgent care center with concerns about progressive pigment loss of her skin. In the last several months, she has noted pigment loss over her fingers, dorsal hands, and forearms. She also reports excessive sweating, weight loss, and a rapid pulse. Wood's lamp examination reveals complete loss of pigment overlying the fingers, dorsal hands, and forearms. A dermatology consult is ordered, along with a complete blood count and measurement of thyroid functions.

What is your diagnosis?

Turn page for answers

DERM DILEMMA

CASE 1



The patient is diagnosed with Zoon's balanitis. This usually presents as discrete, erythematous, moist plaques on the shaft and glans of the penis. Zoon's balanitis probably results from poor hygiene; most men affected by the condition are not circumcised. Biopsy demonstrates a dense lichenoid infiltrate in the mid and upper dermis with an abundance of plasma cells. Treatment is circumcision.

CASE 2



The patient has vitiligo. Vitiligo manifests as fairly discrete areas of complete pigment loss and often presents on the dorsal aspects of the hands and feet. It is especially common at sites of pressure, trauma, and repeated friction. Examination by Wood's light shows total absence of pigment, and histologically, there is an absence of functional melanocytes. Autoimmune disorders have been reported with vitiligo, including hyperthyroidism or hypothyroidism, Addison's disease, and pernicious anemia. Treatment includes narrow-band ultraviolet B phototherapy, PUVA (psoralen plus ultraviolet A) phototherapy, excimer laser therapy, topical steroids, and topical immunosuppressants.

Dr. Bechtel is an associate professor of medicine and director of dermatology at the Ohio State University College of Medicine in Columbus. He is also a member of the EMERGENCY MEDICINE editorial board. **Dr. Zirwas** is an assistant professor of medicine in the dermatology division at the Ohio State University College of Medicine.