

Common Cutaneous Signs of Medical Illnesses

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Rashes not to miss

- underlying systemic disease

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Cutaneous necrosis secondary to
Calciophylaxis

Elevated serum calcium levels

Parathyroidism

Cutaneous manifestations of some medical disease

1. Pruritus

2. Skin manifestations :

Endocrine diseases

Renal diseases

Liver diseases

Gastrointestinal diseases

Pancreatic diseases

Pulmonary diseases

Autoimmune diseases

3. Cancer

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Candida Balanitis

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Diabetic Dermopathy

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Other Skin Signs in Diabetes

Candida balanitis

Acanthosis nigricans

Diabetic dermopathy

Necrobiosis lipoidica

Bullous diabeticorum

Scleredema diabeticorum

Eruptive xanthomas

Necrobiosis Lipoidica Bullous Diabeticorum

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Scleredema Diabeticorum

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Eruptive Xanthomas

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Pretibial Myxedema

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Hyperthyroidism

Pruritus

Hyperhidrosis

Pretibial myxoedema

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Addison's Disease

Caused by the stimulant effect of excess adrenocorticotrophic hormone (ACTH) on the melanocytes to produce melanin.

High levels of circulating ACTH bind to the melanocortin 1 receptor on the surface of dermal melanocytes.

Adrenal Diseases

Addison's disease

Cushing's disease

Cushing's Disease

Striae

Bruising

Acne

Hirsutism

Striae

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Acne

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Gastrointestinal Diseases

1. Inflammatory bowel diseases
2. Gastrointestinal Bleeding
3. Gastrointestinal Polyposis

Ulcerative Colitis and Crohn's disease

Pyoderma Gangrenosum

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Erythema Nodosum

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Crohn's disease

Oral Granulomatosis

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A large, solid light-green rectangular area that serves as a placeholder for an image related to Oral Granulomatosis.

Perianal Crohn's

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A large, solid light-green rectangular area that serves as a placeholder for an image related to Perianal Crohn's disease.

Gastrointestinal Bleeding

Hereditary hemorrhagic telangiectasia

Blue rubber bleb nevus syndrome

Henoch Schonlein purpura

Degos' disease

Pseudoxanthoma elasticum

Hereditary Haemorrhagic Telangiectasia

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Hereditary Haemorrhagic Telangiectasia

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Increase in telangiectasia in the skin

AVMs

May be present in liver, brain and lungs and other organs

In the GI tract, associated with bleeding

Blue Rubber Bleb Nevus Syndrome

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Blue Rubber Bleb Nevus Syndrome

Multiple Cutaneous and GI
venous malformations

Soft compressible cutaneous
nodules

Small intestines venous mal-
formations

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Muir-Torre Syndrome

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upon speaker's request.*

Keratoacanthoma

Autosomal Dominant

Keratoacanthoma and sebaceous tumours

Individuals are prone to develop cancers of the colon, breast, and genitourinary tract

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upon speaker's request.*

Sebaceous Adenoma

Gastrointestinal Polyposis

Gardner's syndrome

Cowden's syndrome

Peutz Jegher Syndrome

Muir Torre Syndrome

Epid

Gardner's Syndrome

Variant of familial polyposis coli

AD disease

GI polyps, multiple osteomas, and skin and soft tissue tumors.

Cutaneous findings include epidermoid cysts, desmoid tumors, and other benign tumors

Lipoma, fibromas, leiomyomas, osteomas

S

Peutz Jegher syndrome

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Peutz Jegher's Syndrome

Autosomal dominant

Characterized by intestinal hamartomatous polyps

Distinct pattern of skin and mucosal macular melanin deposition.

15-fold increased risk of developing intestinal cancer

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Liver Disease

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Hepatitis C infection

Necrolytic acral erythema

Cryoglobulinaemic purpura

Porphyria cutanea tarda

Lichen planus

Lichen Planus

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speaker's request.*

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Cutaneous Manifestations of Renal Failure

a. Pruritus

b. Perforating dermatoses

c. Calciphylaxis

Perforating dermatoses (umbilicated papules and nodules)

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Calciophalaxis – cutaneous necrosis

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Pulmonary Diseases

Cutaneous Sarcoidosis

Yellow nail syndrome

Sarcoidosis

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Yellow nail syndrome

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Rashes not to be missed

– Autoimmune diseases

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Subacute Cutaneous
Lupus Erythematosus

Autoimmune diseases

Lupus erythematosus

Dermatomyositis

Progressive systemic sclerosis

Rheumatoid arthritis

Lupus Erythematosus

2 types of skin manifestations :

a. Cutaneous lupus

b. Skin manifestations not specific to lupus erythematosus

The Spectrum of Cutaneous Lupus

Discoid lupus

Subacute cutaneous LE

SLE

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Erythematous plaques with adherent scales

Livedo racemosa secondary to antiphospholipid syndrome

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Progressive Systemic Sclerosis

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Rheumatoid arthritis

Pyoderma gangrenosum

Cutaneous vasculitis

Rheumatoid nodules

Cutaneous Vasculitis

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Rheumatoid nodules

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Rashes not be missed – malignancy

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speaker's request.*

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speaker's request.*

Mycosis Fungoides

Cancer

Metastasis

Paraneoplastic

Cancer metastasis can be nodular

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Cancer metastasis - Plaque

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Cancer metastasis - erysipelas like

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Leukaemia Cutis

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Paraneoplastic

Malignant Acanthosis nigricans

Malignant ichthyosis (Ichthyosis acquisita)

Dermatomyositis

Malignant acanthosis nigricans

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Tripe Palm

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Most common underlying cancer
is tumour of the gut

Especially stomach cancer

Acquired Ichthyosis

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Dermatomyositis

Heliotrope
rash

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request.*

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Shawl Sign

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Flagellate erythema

Holster sign

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Praying Sign

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Mechanic's Hands

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Mechanic's Feet

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Gottron's papules Peri-ungual erythem

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Dermatomyositis – 40% malignancy risks

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Paraneoplastic conditions

Neutrophilic dermatoses

: Sweets syndrome

: Pyoderma gangrenosum

Necrolytic migratory erythema

Erythema gyratum repens

Neutrophilic Dermatoses

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Sweet's Syndrome

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Pyoderma Gangrenosum

Erythema Gyrratum Repens

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Case Presentation

59/C/lady

History of chronic rhinosinusitis and nasal polyposis

Rashes on right neck, slightly itchy and painful

Spread to R ear, associated with ear pain

→ Ascending lymphangitis

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History – ENT review

Nasoscopy : Mucopus ++ anterior and posterior nasal spaces

Tender right cervical LN

→ Sinusitis with OME vs Otomastoiditis with cellulitis

Augmentin 14 days

Pain improved but rashes were persistent, burning sensation on R ear

Progress ...

2 weeks later: persistent scaly erythematous patches on R neck, ear

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Over the next 1 month ...

- New rashes on dorsum of hands
- Progressed to elbows, buttocks

- Itch on eyelids, no obvious erythema noted

- Fatigue, exertional dyspnoea, dysphagia, proximal myopathy, LOA/LOW, early morning joint stiffness

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Dermatomyositis with rapidly progressive ILD

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Summary

The skin can give us many clues to underlying medical illness

Awareness and astute observation and recognition of these signs can help in the early detection and diagnosis

Rashes not be missed : autoimmune disease and underlying malignancies

- requires an high index of suspicion

Thank You

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