Case 12

A 56-year-old man from Pathumthani

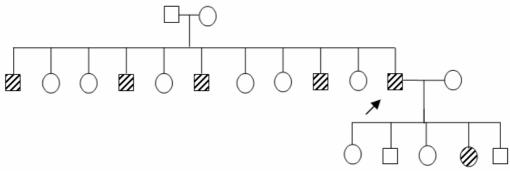
Chief complaint Brownish papules on his trunk, face and extremities since

birth.

Present Illness In childhood, he developed asymptomatic multiple small light-brownish with elevated borders on his trunk, face and extremities, which gradually progressed increased in numbers.

Past History Ni

Family history The pedigree was shown as below.



Physical examination

skin exam There are multiple well demarcated small light brownish patches with a threadlike annular border on all extremities, trunk and face, sparing the palms and the soles.



Fig. 1

Histopathology (S03-9001)

- focal parakeratosis
- hypogranulosis beneath parakeratotic foci
- few dyskeratotic and vacuolated cells beneath parakeratotic foci
- focal lichenoid infiltrate of lymphocytes admixed with melanophages

Diagnosis Disseminated superficial porokeratosis (DSP)

Presenter Naphat Bhumiratana
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Comment

DSP is a variant of porokeratosis, which is a genetically determined disorder of keratiniztion characterized by circular lesions with central atrophy and distinct peripheral keratotic ridge that corresponds with histopathologically to the "cornoid lamella". It is not related on sun exposed areas. Malignant degeneration has been reported in all forms of porokeratosis, with a risk of about 7.5% determined from one review of the English literature. For this patient, we didn't do any treatment for DSP. We only advised him to avoid direct sun light and to observe lesions often and to come for follow-up on yearly basis.

Reference

- 1. Ninomiya Y, Urano Y, Yoshimoto K, et al: p53 gene mutation analysis in porokeratosis and porokeratosis- associated squamous cell carcinoma. J Dermatol Sci 1997 Mar; 14(3):
- 2. Park BS, Moon SE, Kim JA: Disseminated superficial porokeratosis in a patient with chronic liver disease. J Dermatol 1997 Jul; 24(7): 485-7
- 3. Sasson M, Krain AD: Porokeratosis and cutaneous malignancy. A review. Dermatol Surg 1996 Apr; 22(4): 339-42



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