

Misdiagnosis of Skin Vasculitis Easily Avoided Thanks to Dermoscopy

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Case Presentation

A 70-year-old man was referred to our department due to a subacute onset of a diffuse purpuric burning and itching rash primarily affecting his lower limbs (Figure 1A). The initial clinical diagnosis was cutaneous vasculitis. Given the purple, partially ulcerated, palpable nature of the lesions, a diagnosis of vasculitis appeared plausible, prompting us to proceed with our usual diagnostic protocol, including skin biopsy. However, in recent years, the use of dermoscopy has become more and more diffuse, not only for suspected malignant lesions but also for inflammatory conditions (inflammoscopy) [1]. In this case, dermoscopic assessment proved to be of paramount importance. Upon closer examination, we identified a purpuric background and a scabies furrow (Figure 1B). Consequently, we promptly revised the diagnosis, and subsequently the management, to scabies.

Teaching Point

Previous studies have described vasculitis-like scabies. Histological examinations have revealed leukocytoclastic vasculitis in patients with concurrent scabies infestation, suggesting a hypersensitivity reaction mediated by the immune system against mite antigens [2]. However, we posit that hemorrhagic and purpuric manifestations could also result from vigorous scratching in elderly patients who are under antiplatelet or anticoagulant treatment rather than indicating true histological vasculitis. In any case, most clinical manifestations resolve with appropriate antiparasitic treatment.

In conclusion, dermoscopy plays a crucial role in inflammatory conditions, particularly proving highly effective in diagnosing scabies and distinguishing it from clinical mimickers, including cutaneous vasculitis

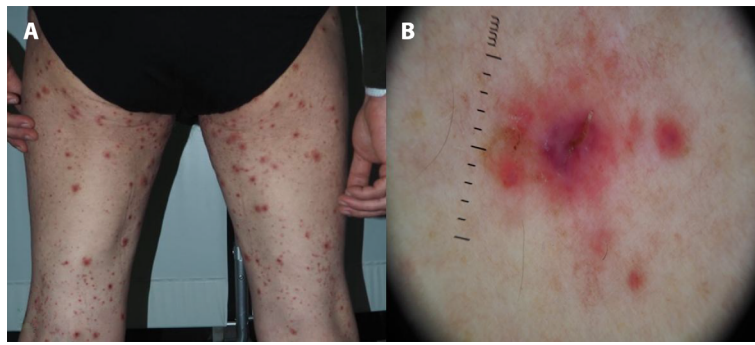


Figure 1. (A) Diffuse purpuric skin eruption of the lower limbs. (B) Dermoscopic observation shows a scabies furrow on a purplish background.

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