



DERMATOPATHOLOGY

## VITILIGINOUS AMYLOIDOSIS – AN UNCOMMON PRESENTATION OF TWO COMMON DISEASES

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**Introduction:** Vitiligo is a depigmenting disease of multifactorial aetiologies presenting pathologically as islands of loss of active melanocytes. Primary cutaneous amyloidosis is a disorder of deposition of amorphous fibrillary protein in the dermis visible as homogenous hyaline eosinophilic deposits in the dermis. We present two cases with clinical vitiligo which revealed amyloidosis on histopathological examination.

**Observation:** Case 1 – A 62 year old diabetic male presented with depigmented patches on forehead and arms since 2 months which were mildly itchy. On examination, confetti patterned white patches with koebnerization which accentuated under wood's light were present over a surrounding diffuse brown hyperpigmentation in a rippled fashion which was suggestive of macular amyloidosis. This was present for many years with little concern to the patient. A biopsy was performed from the edge of a vitiligo patch.

Case 2 – A 40 year old female with large vitiligo patches with leucotrichia for 14 years on abdomen and legs presented with new onset severe pruritis and rapidly spreading depigmented patches on forearms, thighs, back and face since 4 months. The new lesions were mostly in a confetti pattern with few showing mild erythema and atrophy. Accentuation was present on wood's light examination. A clinical diagnosis of generalized lichen sclerosis et atrophicus was made and a biopsy was performed.

Both the biopsies showed similar features of epidermal orthokeratosis with abundant extracellular hyaline, globular eosinophilic deposits in the superficial dermis abutting the basal layer. Subtle interface pathology with vacuolization of basal layer was noted. Masson Fontana stain showed amelanosis along basal layer and congo red stain confirmed amyloid deposits.

**Key message:** These cases highlight the importance of histopathological examination of an active pruritic vitiligo patch to underline the inflammatory pathology and design a management based on targeting the cause.

