



DERMOSCOPY AND SKIN IMAGING

# A STUDY ON DERMASCOPIC FEATURES OF PRIMARY LOCALIZED CUTANEOUS AMYLOIDOSIS

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**Background :** Macular and lichen amyloidosis are common variants of primary localized cutaneous amyloidosis (PLCA) in which clinical features of pruritus and skin scratching are associated with histological findings of deposits of amyloid staining on keratinous debris in the papillary dermis. Though often diagnosed clinically, biopsy is sought in atypical cases. As most of lesions are hyperpigmented with pathology occurring in epidermis and dermal papillae, dermoscopy might be helpful in making a diagnosis without a need to perform an invasive procedure.

**Objectives:** To describe the dermoscopic features observed in a series of patients with PLCA attending dermatology department.

**Material and methods:** Cases clinically conforming to either macular or lichen amyloidosis were enrolled for study. Dermoscopic examination was performed by both polarized and non-polarized handheld dermoscope with a 10-fold magnification.

**Results:** A total of 75 patients of PLCA were enrolled. 42 patients had macular amyloidosis and 33 had lichen amyloidosis. Both type of amyloidosis showed few characteristic dermoscopic features. A central white hub surrounded by pigmentation in varying shapes was most common finding in macular amyloidosis whereas scar-like spot surrounded by collaret of brown dots was common in lichen amyloidosis.

**Conclusion:** The present study describes dermoscopic features of PLCA, which may assist in making diagnosis accurately.

