



DERMOSCOPY AND SKIN IMAGING

DERMOSCOPIIC FEATURES OF ERYTHROKERATODERMA VARIABILIS PROGRESSIVA

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Background: A 25-year-old caucasian female was referred with a rash that first appeared in childhood, previously diagnosed as tinea corporis, psoriasis and pityriasis rubra pilaris (PRP).

Observation: Examination revealed scaly, erythematous plaques symmetrically distributed on the chest, back, upper and lower limbs with sparing of the popliteal and antecubital fossae. Dermoscopy showed white scales and diffuse short linear vessels in a light pink background. Histology from left knee biopsies showed orthokeratotic hyperkeratosis, hypergranulosis, irregular acanthosis and papillomatosis supporting a diagnosis of Erythrokeratoderma Variabilis Progressiva (EKVP).

Key message: EKVP is a rare genodermatosis and still far too little known. It should be considered in each patient with a long history of a rash resembling psoriasis or ringworm and poorly responding to treatment. Histology is essential for a definite diagnosis; however, EKVP seems to show a distinctive dermoscopic pattern that may point toward its diagnosis and be useful for the differential diagnosis from other resembling dermatoses. In fact, the dermoscopy of this case shown white scales and diffuse short linear vessels in a light pink background. These findings are different from the ones associated to psoriasis (diffuse white scales and dotted vessels over a light red background) or PRP (whitish or yellowish keratotic plugs and linear vessels in a yellowish background).

