DERMOSCOPY AND SKIN IMAGING

DERMOSCOPIC FINDINGS IN HYPERTROPHIC LICHEN PLANUS

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Background: Hypertrophic lichen planus (HLP) is a chronic inflammatory dermatitis characterized by hyperkeratotic pruritic plaques predominantly involving the lower limbs. Diagnosis is confirmed by histopathological data. Recent publications highlight the contribution of dermatoscopy in the early recognition and treatment of the disease.
We report a case of HLP and describe its dermoscopic features.

Observation: A 75-year-old patient presented with a five-month history of itchy plaques located on the legs. Dermatological examination showed hyperkeratotic, pigmented plaques with erythematous borders, with sizes ranging from one to five centimeters. They involved predominantly the lower limbs. Dermatoscopic examination with polarized light found pearly white areas arranged in a reticular pattern, peripheral striations, gray-blue globules, brownish globules and comedo-like openings filled with yellowish material. There was no specific vascular pattern. The clinical and dermatoscopic aspects were consistent with the diagnosis of HLP. A cutaneous biopsy was performed. Histological examination revealed epidermal hyperplasia with hypergranulosis, orthokeratotic hyperkeratosis, a vacuolar degeneration of the basal layer and a band-like lymphocytic inflammatory infiltrate of the papillary dermis. The HCV serological analysis was negative. The patient was treated with topical steroids and antihistamine medication. He showed significant improvement two months later. A long-term follow-up was recommended.

Key message: Dermatoscopy is a non-invasive tool that can be useful to evaluate inflammatory dermatoses. Our case is consistent with the previously published data, describing the dermoscopic signs of HLP. This dermoscopic pattern can be correlated to histopathological data. Pearly white areas correspond to compact orthokeratosis and acanthosis, comedo-like openings to hypergranulosis of the dilated infundibulum, and blue-gray globules to dermal melanophages.