DERMOSCOPY AND SKIN IMAGING

WHITISH PERIFOLLICULAR HALO IN DERMOSCOPY OF SALT AND PEPPER APPEARANCE IN DIAGNOSIS OF SYSTEMIC SCLEROSIS AND PULMONARY FIBROSIS

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Introduction: Systemic slcerosis is a multisystemic disease characterized by skin sclerosis and internal organ infiltration of fibrosis due microvascular damage. Frequently, diagnosis of systemic slcerosis may be delayed, leading to advanced disease and organ disfunction. In this cases, a difusse dyspigmentation in a form of salt and pepper appearance may help in early diagnosis. But sometimes this sign can be misdiagnosed to repigmentation in vitiligo.

Objetive: Describe clinical characteristics and dermoscopic pattern in salt and pepper appearance in systemic slcerosis, and compare it with repigmentation in vitiligo.

Material and methods: All patients with systemic slcerosis diagnosed by pathology with clinical salt and pepper appearance sign and who attented to our dermatology department, where evaluated by clinical examination, dermoscopic pattern, histopathology and high resolution computed pulmonary tomography.

Results: Three patients were admited, all of them were female and mean age was 57 years old. Two of three patients have another skin manifestation of systemic sclerosis like morphea like plaque or sclerodactyly. Dermoscopic pattern included in three patiens have a diffuse hypopigmentation and a perifollicular circular pseudo-reticular hyperpigmentation that respect a whitish perifollicular halo; this pattern was compared with five patients with repigmentation in vitiligo in same topography discarding perifollicular halo. Histological sections showed perifollicular dermal fibrosis and pigment retention at follicles. All patients have pulmonary fibrosis, two of them in diffuse insterstitial lung disease and one in patches of stained glass pattern.

Conclusions: Whitish perifollicular halo may be an important dermoscopic clue for diagnosis of systemic slcerosis and pulmonary fibrosis in systemic slcerosis.