



HAIR DISORDERS

## GIANT VERRUCOUS EPIDERMAL NEVUS PRESENTING AS PLICA “POLONICA”

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**Background:** Verrucous epidermal nevus (VEN) is a common type of keratinocyte hamartoma present at birth or occurring late in life. It may be seen at any location, but less commonly on the head and neck. VEN can have various clinical presentations that differ in their extent of involvement and structure. Frequently, it is characterized by brown to skin-coloured papules that coalesce into plaques.

**Observation:** A 55-year-old Caucasian woman from a low socio-economic rural background presented with a 40-year-old diffuse scalp dermatosis. Since childhood she had restrained herself from caring for her increasingly matted hair, cutting her hair or properly addressing her scalp condition. She refrained from washing her hair and covered it with a scarf, daily. There was no relevant personal or familial history. A history of psychiatric illness was not disclosed. The clinical examination revealed multiple, well-delimited, verrucous, plaques of thick, yellow-brown and greasy scale distributed in a coalescent cobblestone pattern over the entire scalp. There was no associated itching or pain. The remaining cutaneous examination showed mere xerosis. Two biopsy specimens revealed hyperkeratosis, papillomatosis and discrete acanthosis consistent with verrucous epidermal nevus. The diagnosis of plica polonica, with features of dermatosis neglecta, overlying a VEN, was made. The patient consistently refused our efforts to provide treatment, and remains negligent of her own condition.

**Key message:** Plica polonica is a common but rarely reported acquired scalp condition characterized by irreversible entanglement of hair. It has been associated with various psychiatric disorders, parasitic infestations, infections, chronic diseases (psoriasis and seborrheic dermatitis), neglect of scalp hair and with the use of shampoos with cationic surfactants. To the best of our knowledge, this is the first case of an association of Plica “polonica” with VEN.

