

PIGMENTATION

MELANOTIC VARIANT OF CHRONIC CUTANEOUS LUPUS ERYTHEMATOSUS: AN UNCOMMON SUBSET IN DARK SKIN

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Introduction: Lichen planus pigmentosus, melasma and pigmented contact dermatitis are the most common causes of facial hyperpigmentation and cutaneous lupus erythematosus is rarely suspected as one of the differential diagnoses. Chronic cutaneous lupus erythematosus (CCLE) presenting de- novo as reticulate pigmented macules and plaques on photodistributed sites, in the absence of follicular plugging, adherent scaling and scarring is uncommon.

Objective: To describe the clinical and histopathological features of melanotic variant of CCLE.

Materials and Methods: A series of patients presenting with dark brown to lichenoid pigmentation on the photoexposed sites were included. Demographic details, clinical features, histopathological, direct immunofluorescence and serological findings were recorded.

Results: A total of ten patients including six females and four males were recruited. Mean age of the patients was 46 + 5.2 years. All the patients had discrete to coalescent brownish to lichenoid macules and plaques on the forehead, ear helices, malar eminences and chin, forming reticulate pattern at places. Four patients also had similar lesions on the dorsum of hands, V area of the chest and upper back. Photosensitivity was present in 3 cases. Histopathological findings comprised of follicular plugging, apoptotic keratinocytes, basal cell vacuolization, moderately dense lympho-histiocytic infiltrate in the superficial and deep dermis and melanin incontinence in all the patients. Direct immunofluorescence from lesional skin was positive in three cases. Anti-nuclear antibody was positive in four cases.

Conclusions: Melanotic LE is a rare and under-recognized variant of CCLE. It is important to consider it as a differential diagnosis in cases with pigmented macules and plaques on the photodistributed sites and confirm the diagnosis based on clinico-pathological correlation.





