

TROPICAL DERMATOLOGY

INTERESTING NOVEL MANIFESTATIONS OF LEPROSY: IS MR. HANSEN DISGUISED IN THE ERA OF POST-ELIMINATION?

Manoj Pawar⁽¹⁾

Mvp's Dr.vpmch, Nashik, Maharashtra, India, Dermatology, Nashik, India⁽¹⁾

Background: Leprosy is a chronic, infectious disease affecting multiple organs, thus presents with myriad of clinical and serological manifestations.

Observation:

Case - 1 and 2 presented with persistent swelling of lips, whereas 1st patient also had swollen nose and ears.

Case - 3 complained of arthralgia, photosensitivity and annular erythematous plaques over trunk and extremities for 6 months.

Case - 4 presented with generalized loose, wrinkled skin and prematurely aged appearance for 1 year and arthralgia and photosensitivity for 3 months.

Case - 5 and 6 presented with acute onset of tender, erythematous and edematous plaques over face, upper and lower extremities with fever, arthralgia and edema over hands and feet.

Case - 7 had persistent bi-pedal papules.

Case - 8 presented with asymptomatic papules over lips.

Case - 9 came with asymptomatic papules and nodules only over the right ear.

1st two cases were treated in-view of persistent angioedema. Case-3 and 4 closely mimicked mixed connective tissue disease; whereas the latter also had features of cutis laxa. Interestingly in both these cases, there was raised ESR, positive ANA, and RA factor. Case-5 and 6 simulated Sweet's syndrome. Case-7 was initially diagnosed as piezogenic pedal papules. Case-8 resembled benign skin tumor and the last case closely mimicked epithelioid hemangioma.

Interestingly, in all cases there was presence either thickened peripheral nerves (great auricular nerve in Case-9), hint of anesthesia over cutaneous lesions or presence of anesthetic patch elsewhere (Case-2). Case-8 had madarosis. All these characteristic features raised the suspicion of leprosy. The distinctive histopathology and acid fast bacilli positivity by slit-skin smear clinched the diagnosis of leprosy.

Key message: Atypical cases of leprosy are rising in the community causing misdiagnosis or delayed diagnosis and thus hampering the goal of 'leprosy-free world'. High index of suspicion is necessary to diagnose leprosy in patients with atypical cutaneous and systemic



especially rheumatologic manifestations.

