

DERM DILEMMA

WHAT IS YOUR DIAGNOSIS?

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CASE 1

A 64-year-old man presents with increasing pain and stiffness in his arms and legs. He has a history of chronic renal failure and may initiate dialysis soon. He has had some recent MRI scans. On physical exam, he has firm, “woody” induration on his arms and legs with tightening of his fingers. His legs appear sclerotic with narrowing above the ankles. A dermatology consult is ordered for a skin biopsy.

What is your diagnosis?



CASE 2

A 30-year-old man presents with elevated blood pressure. On laboratory evaluation, he is noted to have elevations in his liver enzyme level and hemoglobin concentration. Physical examination shows thick terminal hair over his entire back and lateral face. According to the patient, this thick terminal hair has been evolving over the past year. He works out at a local gym and admits to using anabolic steroids to increase his muscle mass.

What is your diagnosis?

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CONTINUED



CASE 1

The patient has nephrogenic systemic fibrosis. Patients with significant renal failure who have been exposed to gadolinium in MRI contrast media may develop hard, sclerotic, “woody” induration of their arms and legs with decreased range of motion of their fingers. They may experience severe pain and limited movement in their extremities. There is no significant efficacious treatment.



CASE 2

The patient has iatrogenic hirsutism secondary to use of anabolic steroids, which he obtained at a local gym. This type of hirsutism tends to be localized to the lateral aspects of the face and back. Anabolic steroids and nonsteroidal progestogen-type oral contraceptives have been noted to cause iatrogenic hirsutism. Athletic young men with increasing hair growth on the lateral face and back should be screened for anabolic steroid use.