



## Case report

# Pellagra. A challenging differential diagnosis in burn injuries



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### KEYWORDS

Pellagra;  
Burns;  
Photosensitivity disorders;  
Dermatitis;  
Niacin;  
Blisters

**Abstract** With this case report we want to emphasize the importance of performing a thorough physical examination of the burn and detailed review of the patient's history.

This is a challenging case because it deals with an uncommon disease nowadays, pellagra, which presents lesions with an appearance very similar to burns; on the other hand the management of pellagra is different to the management of the common burns we are used to handling day-to-day.

With this case report we will be able to revise the broad list of different injuries that can bring up an issue related to a correct diagnosis, caused by a large diversity of different etiologies with cutaneous expression.

We will look over the diagnostic process of pellagra, management, treatment and results in this patient.

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## Introduction

A burn is basically caused by temperature, either high or low, a chemical substance or electricity. Depending on the depth of the burn injury, they present different appearances and recovery

ability, and according to these characteristics we classify the different burn injuries in different degrees, and decide the recommended treatment for each case. The deeper the burn is, the better option surgical management is.

In principle, few lesions are confused with burn injuries; as a result of its morphology, appearance, recovery evolution, and stages of healing, aspects all well described for burn injuries. Moreover, we usually know the cause of the lesion, as the patient

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is normally conscious of the mechanism of production.

On the other hand, a huge range of injuries with different etiologies arrive at Burns Centers on day-to-day basis, and some cases can be so challenging that we might end up confusing those lesions with burns injuries, although they aren't actually such a thing. This study was carried out in the Burns Center of Hospital La Fe de Valencia, where 1.963 annual aggregated stays were reported in year 2012, of which 138 required hospitalization in that same year. Nevertheless, the case report we present is rare, and very different to the common burn cases we are used to handling day-to-day [1].

With this case report we will be able to revise the broad list of different injuries that can bring up an issue related to a correct diagnosis, caused by a large diversity of different etiologies with cutaneous expression.

The aim of this study is to emphasize the importance of performing a thorough physical examination of the burn and detailed review of the patient's history.

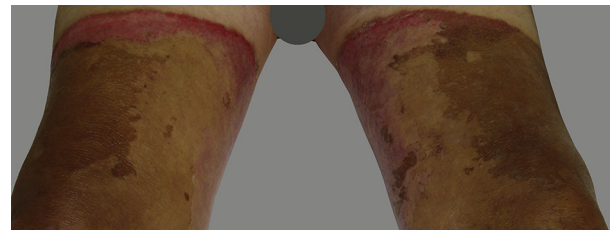
## Case report

A 45-year-old Caucasian man was referred from a primary health care medical centre to the Burns Unit in Hospital La Fe (Valencia-Spain). He showed compatible lesions with burns, located in the thorax, the abdomen and both superior and inferior limbs, with a history of 20 days of evolution.

Physical examination revealed plenty of burn-like lesions in the thorax, the abdomen and arms, with rests of desquamation of the skin, and with



**Figure 1** Burn-like lesions in thorax, abdomen and arms, with rests of skin desquamation and clear borders.



**Figure 2** Burn – like lesions on thighs were compatible with superficial partial thickness burns.



**Figure 3** Desquamation on thigh lesions. Note that the lesions are clearly detached from the healthy skin by a lineal area of desquamation.

clear borders (Fig. 1); they could be classified as superficial burns and superficial partial-thickness burns. On the thighs there were some burns – like lesions compatibles with superficial partial thickness burns (Figs. 2 and 3), nevertheless the deepest burn-like lesions were located in distal areas of both legs (Figs. 4 and 5). The patient presented approximately deep partial thickness burns in 8% TBSA.

On both thighs, the superficial partial thickness burns were accompanied by rests of



**Figure 4** Deep burn-like lesions in distal areas of left leg.

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