

# Dermatologic Manifestations of Systemic Diseases



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## KEYWORDS

- Dermatology • Systemic disease • Skin findings • Gastrointestinal conditions
- Rheumatologic conditions

## KEY POINTS

- Certain dermatologic conditions can be associated with systemic illness, and patients may present initially with a dermatologic complaint; therefore, the primary care physician should be familiar with the dermatologic sequela of systemic diseases.
- Initial evaluation almost always involves various laboratory studies.
- Treatment is specific to the particular underlying diagnosis and can include surveillance with clinical evaluations and laboratory monitoring, pharmacotherapy with topical or oral medications such as steroids or immune modulators, and directed treatment of the underlying systemic condition.
- Consultation with various subspecialists, such as Dermatology, Rheumatology, and Gastroenterology, may be warranted for particular conditions that require further management.

## PYODERMA GANGRENOSUM

### *Definition*

Pyoderma gangrenosum (PG) is a rare but serious noninfectious ulceration of the skin with unknown cause. It is characterized by painful cutaneous ulcerations with mucopurulent and sometimes hemorrhagic exudate. Although the underlying cause is poorly understood, the formation of PG has been linked to the dysregulation of the

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immune system. More than half of individuals affected have other associated systemic diseases such as inflammatory bowel disease (IBD) and rheumatoid disease. In approximately 30% of patients affected, new ulcerations are typically secondary to pathergy formation of ulcers following injury or trauma to the skin. PG can also affect other organ systems such as the central nervous system, lymph nodes, gastrointestinal (GI) tract, liver, and spleen.<sup>1-3</sup>

### ***Epidemiology***

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PG occurs predominantly among women. The peak of incidence is typically within the ages of 20 and 50 years with a general incidence estimated between 3 to 10 per million per year.<sup>3,4</sup>

### ***Clinical Presentation***

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Initially, individuals often present with symptoms of generalized malaise such as fevers, arthralgias, and myalgias. The lesion itself usually starts as small pustules and within days grows rapidly, forming an open sore with tissue necrosis. Other associated symptoms include a strong sensation of pain and malodor secondary to infection. Although these ulcers may affect any part of the skin, it is most commonly seen over the lower extremities. The classic appearance of pyoderma gangrenosa is a deep ulcer with well-defined violaceous borders (Fig. 1). Edema, erythema, and induration of the surrounding tissue are often present as well.<sup>2,3</sup>

### ***Differential Diagnosis***

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- Cutaneous vasculitis
- Malignancy
- Other skin infections

### ***Associated Gastrointestinal Conditions***

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Approximately 50% cases are associated with some form of systemic diseases and more commonly GI conditions such as IBD.<sup>2,5</sup>



**Fig. 1.** Pyoderma gangrenosa. (Courtesy of Freire da Silva S. Dermatology Atlas. Available at: <http://www.atlasdermatologico.com.br/index.jsf>. Accessed April 25, 2015.)

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