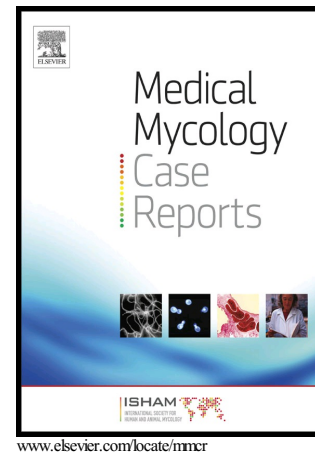


Author's Accepted Manuscript

A case of tinea incognita and differential diagnosis of figurate erythema

Julia-Tatjana Maul, Philipp W. Maier, Florian Anzengruber, Carla Murer, Philipp P. Bosshard, Katrin Kerl, Lars E. French, Alexander A. Navarini



PII: S2211-7539(17)30036-2
DOI: <http://dx.doi.org/10.1016/j.mmcr.2017.07.001>
Reference: MMCR242

To appear in: *Medical Mycology Case Reports*

Received date: 22 June 2017

Accepted date: 1 July 2017

Cite this article as: Julia-Tatjana Maul, Philipp W. Maier, Florian Anzengruber, Carla Murer, Philipp P. Bosshard, Katrin Kerl, Lars E. French and Alexander A. Navarini, A case of tinea incognita and differential diagnosis of figurate erythema, *Medical Mycology Case Reports* <http://dx.doi.org/10.1016/j.mmcr.2017.07.001>

This is a PDF file of an unedited manuscript that has been accepted for publication. As a service to our customers we are providing this early version of the manuscript. The manuscript will undergo copyediting, typesetting, and review of the resulting galley proof before it is published in its final citable form. Please note that during the production process errors may be discovered which could affect the content, and all legal disclaimers that apply to the journal pertain.



A case of tinea incognita and differential diagnosis of figurate erythema

Julia-Tatjana Maul (MD) ^{1*}, Philipp W. Maier ^{1*}, Florian Anzengruber (MD)¹, Carla Murer (MD)¹, Philipp P. Bosshard (PhD) ¹, Katrin Kerl (MD PhD) ¹, Lars E. French (MD) ¹, Alexander A. Navarini (MD PhD)¹

¹ Department of Dermatology, University Hospital of Zurich, Gloriastrasse 31, CH-8091 Zurich, Switzerland

* Joint first authors

ARTICLE INFO

Article history:

Received
Received in revised form
Accepted
Available online

Keywords:

Figurate erythema
Tinea
Misdiagnosis

ABSTRACT

A patient with *tinea incognita* is presented together with a review of the literature of figurate erythema. Figurate lesions are emblematic for dermatology and perhaps the most picturesque efflorescences. The differential diagnosis can be broad and sometimes challenging. Many clinical entities with resembling primary and secondary efflorescences have to be considered as differentials and can be due to anti-infectious, paraneoplastic, allergic, autoimmune or other immune reactions.

2012 Elsevier Ltd. All rights reserved.

1. Introduction

Few physicians can successfully master the clinical challenge of figurate erythema (FE). FE are non-scaling or scaling, usually nonpruritic, annular or arciform, erythematous eruptions that have a tendency to spread centrifugally within hours to days. Their colour can range from slight pink to deeply violaceous, and they are usually characterized histologically by a dense lymphohistiocytic infiltration surrounding superficial and deep dermal vessels. Usually, the papillary and reticular dermis are affected.

Download English Version:

<https://daneshyari.com/en/article/8484779>

Download Persian Version:

<https://daneshyari.com/article/8484779>

[Daneshyari.com](https://daneshyari.com)