

Cobblestone-like Skin

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Case presentation

A 55-year-old Caucasian man who was positive for obesity, hypertension and congestive heart failure presented for a sixteen-months history of recurrent lower limbs swelling with progressive thickening of the skin. Clinical examination revealed lymphedema with deformed fibrotic enlargement of the extremities. Brownish pigmentation, with generalized lichenification (Figure 1A) and cobblestone-like papules and nodules on the lower two thirds of both legs were also notable (Figure 1B). Swabs from some ulcerated lesions of the left pretibial area were obtained, but cultures did not show any pathogens growth. Histological examination of a nodular lesion showed hyperkeratosis, parakeratosis, and acanthosis of the epidermis, as well as edema and dilated lymphatic spaces in the papillary and reticular dermis. No neoplastic changes were found. Diagnosis of elephantiasis nostras verrucosa (ENV) was made upon clinical and histopathological findings.

Teaching point

ENV is an uncommon dermatological disorder characterized by hyperkeratotic, verrucous, and papillomatous projections [1]. Keong described it as “a non-filariasis chronic lymphedema, causing disfigurement of the extremities, and it will lead to recurrent infections and disabilities” [2]. The diagnosis is based on anamnesis and peculiar skin modifications [1]. Differential diagnosis includes venous stasis dermatitis, pretibial myxedema and filariasis [1]. Several therapeutic options have been described in literature such as skin care, weight reduction, compressive medications and physiotherapy [2]. Oral retinoids, surgery, and antimicrobials for super infections have also been used [1]. The unique target of the therapy is represented by restoring function and reducing physical disability. As chronic lymphedema could be the antechamber of lymphangiosarcoma, long-term follow-up is highly recommended [2].

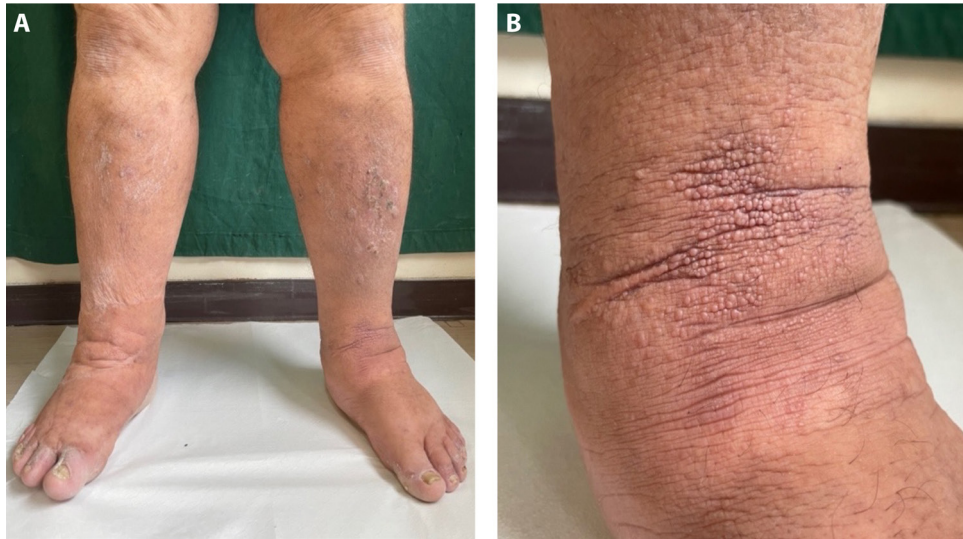


Figure 1. (A) Lymphedema of the lower extremities, with brownish pigmentation and generalized thickening of the pretibial skin. (B) Close view of cobblestone-like papules and nodules on the lower two-thirds of left leg.

References

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