[PICTURES IN CLINICAL MEDICINE]

Azure Lunulae and Leukoencephalopathy in Wilson Disease

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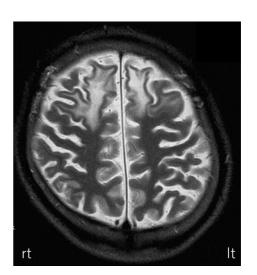
Key words: Wilson disease, azure lunulae, leukoencephalopathy

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Picture 1.



Picture 2.

A 24-year-old Japanese man with no family history of neurological disorder or parental consanguinity developed delusion and extrapyramidal symptoms, including finger tremor and rigidity.

He displayed azure (blue) lunulae of the fingernails (Picture 1). T2 MRI showed high-intensity areas in the frontal white matter (Picture 2). The existence of Kayser-Fleischer rings, low serum ceruloplasmin (3.1 μ g/dL), and increased urinary copper excretion (211 μ g/L) led to the diagnosis of Wilson disease (WD).

Azure lunulae, which are often reported in argyria, were first described in 1958 as a diagnostic dermatological finding in WD (1); however, given its extreme rarity there are few additional reports.

In WD, frontal and/or parietal white matter MRI lesions have mainly been reported in Asian populations (2); however, isolated white matter lesions without basal nuclei involvement are rare. We should bear in mind that azure lunulae are important diagnostic clues for WD and that isolated

white matter changes may occur in WD.

The authors state that they have no Conflict of Interest (COI).

Hiroko Hori , Yosuke Kudo, Yoshiyuki Kuroiwa and Fumiaki Tanaka contributed equally to this work.

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