

IMAGING DIAGNOSIS

Dancers in COVID-19

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A 50-year-old man with autism spectrum disorder presented to the emergency room with an asymptomatic, diffuse purpuric eruption. He had mild acute kidney injury, an elevated absolute eosinophil count and immunoglobulin E level as well as low complement. Skin biopsy was obtained from a wrist lesion and the patient was discharged on high dose prednisone for suspected cutaneous small vessel

vasculitis. Biopsy (Figure 1a) revealed a mite in the stratum corneum with its thin chitinous exoskeleton (a), prominent dorsal V-shaped spines (b) and striated muscle (c). A week later, he presented with severe COVID-19 infection requiring intravenous dexamethasone and noninvasive ventilation. The patient denied itch but was noted to frequently scratch his body and scalp. Before the availability of

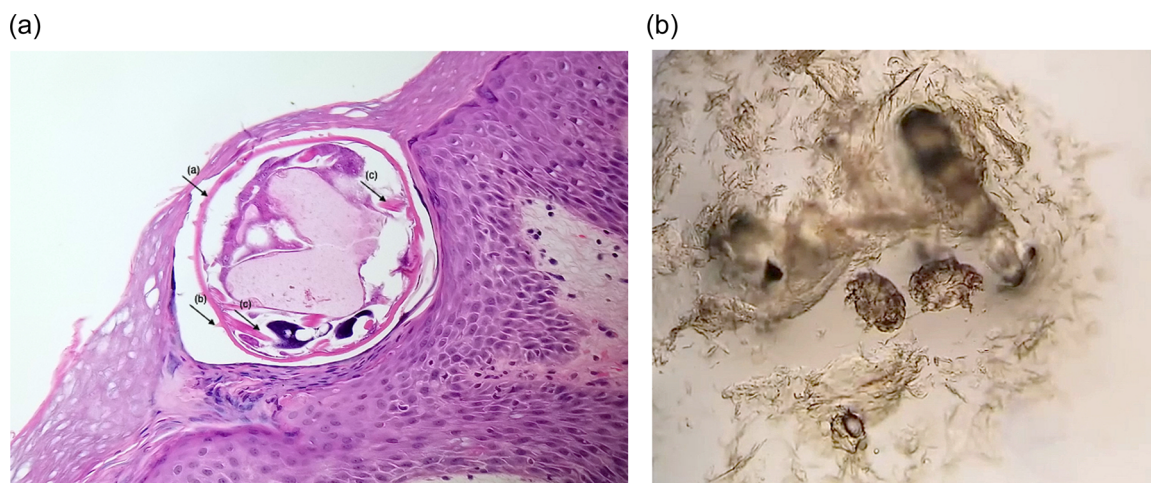


FIGURE 1 (a) A *Sarcoptes scabiei* mite in the stratum corneum. (b) Two *S. scabiei* mites on skin scraping.

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histopathology, a skin scraping using a number 15 blade dipped in mineral oil may rapidly reveal *Sarcoptes scabiei* mites (Figure 1b). Scratching stopped following a regimen of topical permethrin 5% and oral ivermectin. Some risk factors for crusted scabies are intellectual disability and immunodeficiency including iatrogenic compromise with corticosteroids. Surprisingly, crusted scabies is commonly asymptomatic, but complications include spread to others and secondary bacterial infection. If suspected, scabies can be diagnosed noninvasively with dermoscopy-directed skin scrapings. With a little practice and luck, the clinician looking down the microscope may see dancing mites under their eyes (see Video S1).

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CONFLICT OF INTEREST

The authors declare no conflict of interest.

DATA AVAILABILITY STATEMENT

No new data are generated.

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SUPPORTING INFORMATION

Additional supporting information can be found online in the Supporting Information section at the end of this article.

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