Strange stripe

E.M. Baerveldt*, M.J.M. Diekman

Department of Internal Medicine, Deventer Hospital, Deventer, the Netherlands, *corresponding author: tel.: +31 (0)570-64 66 66, e-mail; e.baerveldt@erasmusmc.nl

CASE REPORT

A 71-year-old woman with documented pernicious anaemia is examined before heart surgery. A circular, bracelet-like, brownish-coloured stripe on the skin above the right ankle is noticed (*figure 1*).

WHAT IS YOUR DIAGNOSIS?

See page 310 for the answer to this photo quiz.

Figure 1. Circular, brownish-coloured stripe above the right ankle (between dotted line)



ANSWER TO PHOTO QUIZ (ON PAGE 309)

STRANGE STRIPE

DIAGNOSIS

Figure 2 showes a 71-year-old Caucasian woman who has been suffering from vitiligo since the age of 25, resulting in near total depigmentation (vitiligo universalis), leaving only one bracelet-like stripe of normal skin above her right ankle (figure 1). Her dark brown eyes contrast with her fair skin. During each of her (ten) pregnancies, the skin darkened and some repigmentation occurred but unfortunately the loss of her tan heralded spontaneous abortion, leaving her childless. Later in life pernicious anaemia was diagnosed. After a recent myocardial infarction, coronary artery bypass grafting was planned. Antiphospholipid antibodies are absent. She has neither thyroid disease nor diabetes mellitus. Her sister also has documented vitiligo and a history of miscarriages.

Figure 1. Circular, brownish-coloured stripe above the right ankle (between dotted line)



Autoimmunity directed against melanocytes is thought to be involved in the pathogenesis of vitiligo. Recently, autoantibodies against the melanin-concentrating hormone receptor I have been identified. Vitiligo is a component of the polyglandular autoimmune syndrome type II, which is characterised by the presence of endocrine disorders such as autoimmune thyroid disease, type I diabetes mellitus, primary adrenal insufficiency and hypopituitarism, and non-endocrine diseases including autoimmune hepatitis, alopecia areata and pernicious anaemia.

REFERENCE

 Kemo EH, Waterman EA, Hawes BE, et al. The melanin-concentrating hormone receptor 1, a novel target of autoantibody responses in vitiligo. J Clin Invest 2002;109:923-30.

Figure 2. Patient at a younger age, showing the typical bilateral symmetrical vitiligo



Published with permission of patient.