

ANSWER TO PHOTO QUIZ (PAGE 92)

MULTIPLE CURVILINEAR LESIONS ON A PATIENT'S BACK

DIAGNOSIS

Based on history and characteristic cutaneous features, a diagnosis of multifocal cutaneous larva migrans (CLM) was established. Oral ivermectin (12 mg; 200 µg/kg) prescribed on two successive days, led to symptomatic relief and cessation of tract extension.

CLM, also termed as “creeping eruption”, is a parasitic infestation produced by burrowing of the larva of *Ancylostoma braziliense*.¹ It is most commonly found in tropical and sub-tropical geographic areas, and is endemic in the Caribbean, Central and South America, Africa, and South-East Asia. The larva enters intact or abraded skin following exposure to soil contaminated with faeces.² Feet, hands, buttocks, and genitalia are usually affected. Secondary infection and rarely Loeffler syndrome (allergic pulmonary response) may complicate the creeping

eruption. Oral ivermectin or albendazole provides excellent response.³

The purpose of documenting this condition is to highlight the unusual features of this common tropical condition - mode of acquisition, involvement of the entire back, and multifocal presentation. In this era of global migration, clinicians worldwide should promptly diagnose and treat such endemic disorders.

REFERENCES

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