COLUMN

Ace Your Certification Exam

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Abstract Dr Jayesh Shah authors this quarterly column, consisting of 5 questions with explanations, to help you practice for your exam.
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1. Phlegmasia alba dolens is a condition associated with which of the following?
 - a. Venous ulcers
 - b. Lymphedema
 - c. More commonly seen in morbidly obese patients who have family history of diabetes
 - d. Hypercoagulability
2. Blue toe syndrome is associated with which of the following?
 - a. Vasculitis
 - b. Antiphospholipid syndrome
 - c. Cholesterol emboli
 - d. Calciphylaxis
 - e. All of the above
3. Which of the following describes the wound edge in a pyoderma gangrenosum ulcer?
 - a. Irregular
 - b. Punched out
 - c. Undermined
 - d. Rolled out
4. Stevens-Johnson syndrome can be caused by which of the following?
 - a. NSAIDS
 - b. Lupus anticoagulant
 - c. Rheumatoid arthritis
 - d. Pyoderma gangrenosum

5. Scleroderma ulcers have which of the following?
 - a. Excessive collagen
 - b. Collagen deficiency
 - c. Hypergranulation tissue
 - d. Absence of matrix metalloproteinases

Answers on back page

Answers

1, d; 2, e; 3, c; 4, a; 5, a

Question 1: Answer d

Phlegmasia alba dolens, also called *white leg*, happens in patients with a deep vein thrombosis that progresses to total occlusion of the deep venous system, causing complete white leg. It is associated with hypercoagulability, which commonly occurs in many cancer states. Skin changes that happen in patients with venous disease and lymphedema are called lipodermatosclerosis. Necrobiosis lipoidica diabetorum is a condition seen more commonly in morbidly obese patients with a family history of diabetes mellitus.

Question 2: Answer e

Blue toe syndrome is usually atheroembolic in nature and can occur because of several mechanisms in various disease states. Mechanical damage to blood vessels secondary to emboli or atherosclerosis is by far the most common cause of blue toe syndrome. In vasculitis, immune complexes are responsible for clinical skin

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manifestations. Hypercoagulable states such as antiphospholipid syndrome (either on its own or as part of systemic lupus erythematosus) and essential thrombocythemia have been known to cause blue toes. In calciphylaxis the cause of blue toes is deposition of calcium.

Question 3: Answer c

Pyoderma gangrenosum ulcers have an undermined edge, venous stasis ulcers have an irregular edge, vasculitis ulcers have a punched-out edge, and a rolled-out edge is seen in malignancy.

Question 4: Answer a

Stevens-Johnson syndrome is a rare, serious disorder in which the skin and mucous membranes react severely to a

medication or infection. Stevens-Johnson syndrome can be caused by several medications, including NSAIDs. Drugs commonly associated with Stevens-Johnson syndrome include allopurinol, NSAIDs, penicillins, and anticonvulsants, which are used to treat seizures. Infections that can cause Stevens-Johnson syndrome include herpes (herpes simplex or herpes zoster), influenza, HIV, diphtheria, typhoid, and hepatitis. Other causes are radiation therapy and ultraviolet light.

Question 5: Answer a

Scleroderma is a widespread connective tissue disease that involves changes in the skin, blood vessels, muscles, and internal organs. Scleroderma ulcers have excessive collagen and excessive matrix metalloproteinases. Scleroderma ulcers usually have a fibrotic base and are extremely painful.