



Thoracic Frog Roes With Zosteriform Distribution

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Case Presentation

A 13-year-old female patient was referred to our department for a thoracic lesion present since birth. The physical examination reveals grouped vesicles with clear and hematic content similar to “frog roe”, with a subcutaneous component and a zosteriform distribution (Figure 1A). She referred episodes of pain and increased soft tissue associated for a few months ago. The polarized light dermoscopy showed pink lacunae divided by white septa and polymorphic vessels. Besides, the “hypopyon sign” was shown inside the lacunae (Figure 1B). The magnetic resonance imaging study reported mixed veno-lymphatic vascular malformation.

Teaching point

“Hypopyon sign” is referred to the 2 shades of colors inside the lacunae (corresponding to dilated, thin-walled lymphatic vessels located in the papillary dermis) due to the blood deposited at the lower side of them, due to the gravity effect, and it is a well described finding in circumscribed lymphangioma [1,2]. Nevertheless, it is useful for the diagnosis of any vascular malformation with lymphatic component, as show in our case.

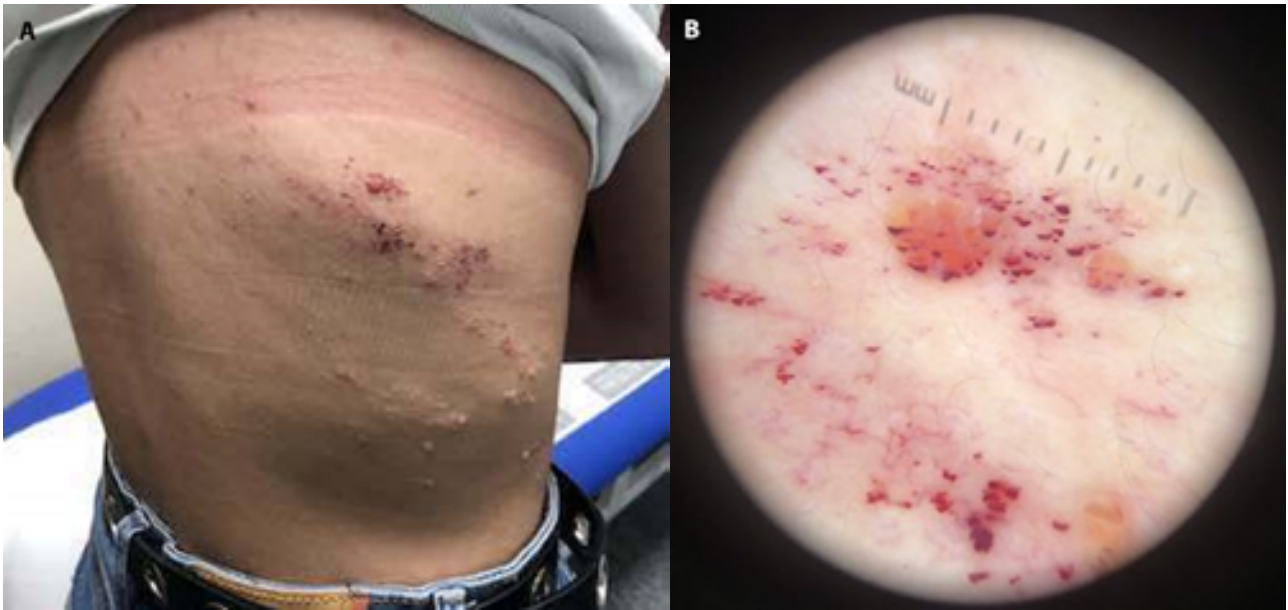


Figure 1. (A) Clinical presentation as grouped vesicles with clear and hematic content similar to “frog roe” with a zosteriform distribution. (B) Dermoscopy (polarised, 25x) of reddish lesions showing half-and-half lacunae demonstrating hypopyon-like features.

References

1. Gencoglan G, Inanir I, Ermertcan AT. Hypopyon-like features: New dermoscopic criteria in the differential diagnosis of cutaneous lymphangioma circumscriptum and haemangiomas? *J Eur Acad Dermatology Venereol.* 2012;26(8):1023–1025. DOI: 10.1111/j.1468-3083.2011.04136.x. PMID: 21645121.
2. Zaballos P, del Pozo LJ, Argenziano G, et al. Dermoscopy of lymphangioma circumscriptum: A morphological study of 45 cases. *Australas J Dermatol.* 2018;59(3):e189–e193. DOI: 10.1111/ajd.12668. PMID: 28752523.