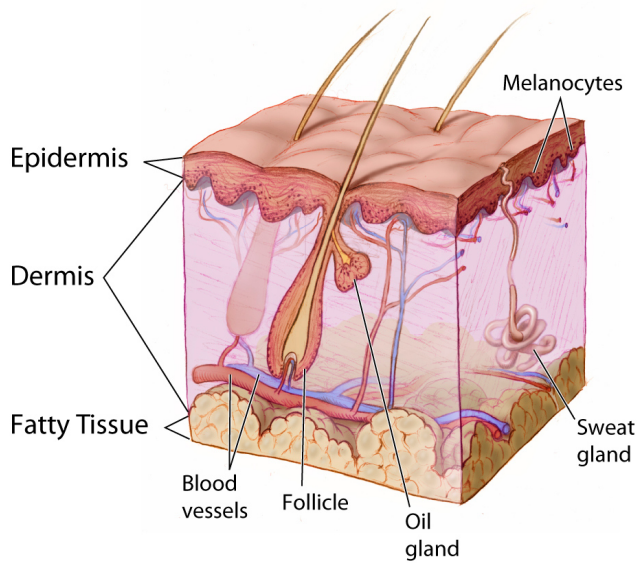


432 Teams

# Dermatology



## Language of Dermatology



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*Reviewer: Fahad AlShayhan*

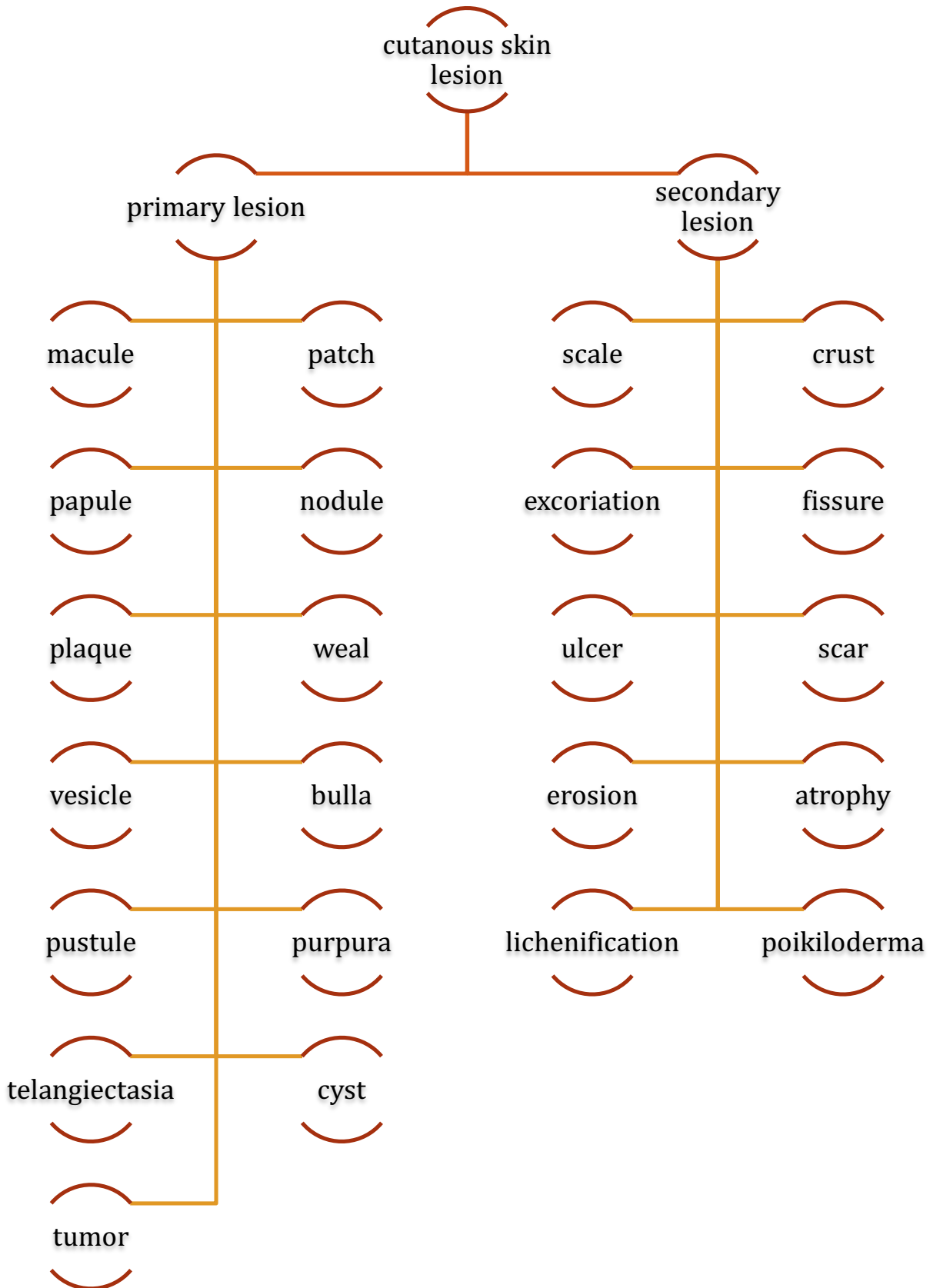
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# Objectives

- 1- To be familiar with common dermatological terms.
- 2- To differentiate between primary and secondary skin lesions.
- 3- To be able to describe skin lesions and communicate with other dermatologists.
- 4- To have a methodological approach to skin lesions.

# Mind Map



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## Primary skin lesion

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**Macule:**

flat circumscribed area of altered skin color **less than 1 cm** in size.  
e.g. Vitiligo, Freckle.



**Patch:**

A flat circumscribed area of altered skin color **more than 1 cm** in size.  
e.g. Vitiligo, Melasma.



**Papule:**

A small, circumscribed **elevation** of the skin **less than 1 cm**.  
e.g. Molluscum Contagiosum, Acne.

Macule with elevation become papule.



**Nodule:**

A solid, circumscribed **elevation** whose greater part lies beneath the skin surface. (**elevation+depth**)  
e.g. Erythema Nodosum, Basal cell carcinoma.



**Plaque:**

A flat topped **palpable** lesion **more than 1 cm** in size.

e.g. Psoriasis.

Patch with elevation become plaque.



**Weal:**

**transient**, slightly raised lesion, characteristically with a pale center and a pink margin.

e.g. Urticaria.



**Vesicle:**

**small** less than 5 mm in diameter circumscribed **fluid** containing elevation.

e.g. Dermatitis Herpetiformis, herpes.



**Bulla:**

**Large** vesicle more than 5 mm in diameter.

e.g. Bullous Pemphigoid.



**Pustule:**

Collection of **pus** or vesicle and bulla that contain pus.

e.g. Pustular Psoriasis, Acne.



**Purpura:**

Visible collection of free red blood cells.

e.g. vasculitis

small spot called **petechiae**, large one called **ecchymoses**.



**Telangiectasia:**

**Dilated capillaries** visible on the skin surface.

e.g. Rosacea.



**Cyst:**

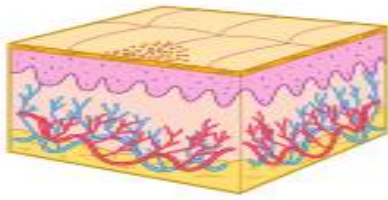
Closed sac-like lesion that contain liquid or semi-solid substance. **Usually soft and has depth.**

e.g. Epidermal cyst.

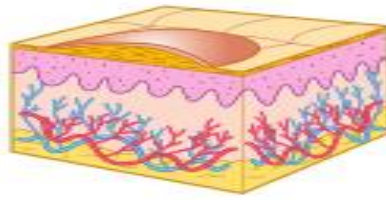


**Tumor:**

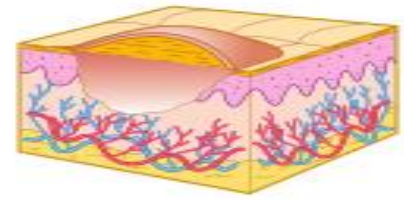
**Solid** elevation of the skin more than 2 cm in diameter and has depth. Like large nodule.



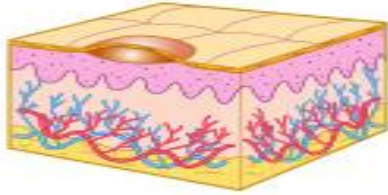
Macule



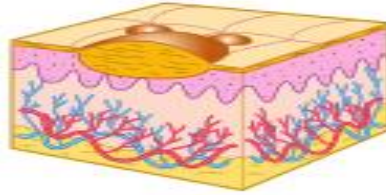
Papule



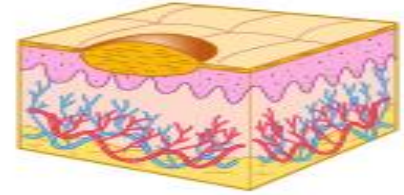
Nodule



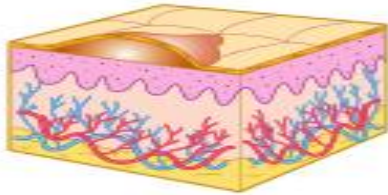
Vesicle



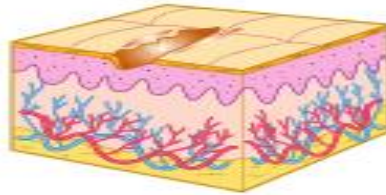
Bulla



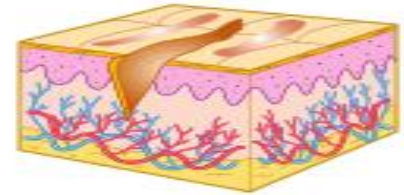
Pustule



Wheal



Excoriations



Fissure

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## *Secondary skin lesion*

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**Scale:**

Thickened, loose, readily **detached** fragments of stratum corneum.  
e.g. psoriasis



**Crust:**

Dried exudate.  
e.g. Eczema, Impetigo.



**Excoriation:**

A shallow abrasion often caused by **scratching**.  
e.g. Atopic dermatitis.



**Fissure:**

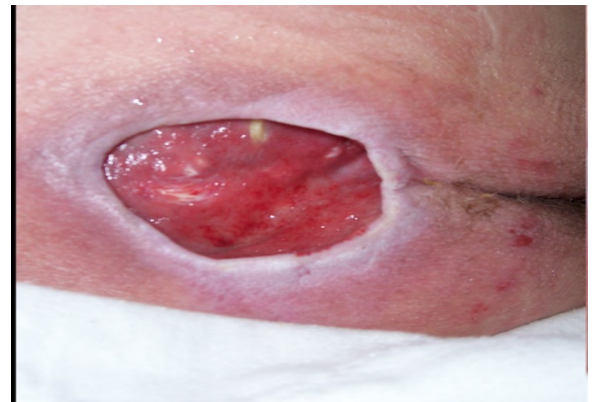
Linear-like or **crack-like** cleavage of the skin.  
e.g. Chronic eczema.

-Look around the fissure in the figure, you can see scale.



**Erosion:**

A moist, circumscribed, usually depressed lesion that result from **loss of all a portion of the epidermis**.  
e.g. Ruptured vesicle or bulla



**Ulcer:**

A hole in the skin in which there has been **destruction of the epidermis and at least the upper papillary dermis**.

e.g. Leg ulcers, Pyoderma gangrenosum.

- Can cause scar.





**Atrophy:**

Thinning of the skin (become shiny).  
Could be epidermal or dermal or both.  
-**Epidermal atrophy** present as thin transparent wrinkled epidermis.  
-**Dermal atrophy** present as depression of the skin.



**Scar:**

A permanent lesion that results from the process of repair by replacement with fibrous tissue.  
e.g. Surgical scar.



**Lichenification:**

Patches of increased **epidermal thickening** with accentuation of skin markings and **pigmentation**.  
e.g. Lichen simplex chronicus. Atopic dermatitis.



**Poikiloderma:**

A morphologic descriptive term, refer to the **combination of atrophy, telangiectasia, and pigmentary changes** (hypo or hyperpigmentation)  
e.g. Dermatomyositis, Radiodermatitis, Mucositis fungoides.

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## *Other Terms Used in Dermatology*

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- **Acantholysis:** a rounding up of epidermal cells resulting from a loss of adhesion between these cells. Pemphigus vulgaris.
- **Acanthosis:** histological term used to describe epidermal thickening due to increase keratinocytes in the spinous layer.
- **Atopy:** triad of atopic dermatitis, asthma, and allergic rhinitis.
- **Balloon degeneration:** gross swelling of keratinocytes seen in epidermal viral infection like herpes simplex.
- **Hyperkeratosis:** excessive formation of normal keratin.
- **Hypertrichosis:** excessive growth of non-androgen dependent hair.
- **Hirsutism:** excessive growth of male pattern hair in **women**.
- **Intertrigo:** dermatitis **in body folds** like axilla and groin.
- **Koebner phenomenon:** the tendency for certain skin diseases like psoriasis to develop on sites of trauma.
- **Nikolsky's sign:** the shearing of epidermis from dermis produced by lateral pressure on the epidermal surface. Pemphigus vulgaris, TEN (**toxic epidermal necrolysis**). [https://www.youtube.com/watch?v=3bjhVZ\\_ZyyU](https://www.youtube.com/watch?v=3bjhVZ_ZyyU)
- **Parakeratosis:** abnormal or incomplete keratinization resulting in the presence of nucleated, flattened squamous cells in the stratum corneum.
- **Spongiosis:** edema of the epidermis mainly intracellular.
- **Rhinophyma:** gross hypertrophy of sebaceous gland tissue resulting in increase in volume of nasal soft tissue. Rosacea.
- **Wickham's striae:** white linear markings on the surface of the violaceous papules of lichen planus.
- **Auspitz sign:** appearance of punctate **bleeding spots** when psoriasis scales are scraped off. [https://www.youtube.com/watch?v=Hf\\_ofY3gcj4](https://www.youtube.com/watch?v=Hf_ofY3gcj4)
- **Dermatographism:** skin becomes raised and inflamed forming weals when stroked, scratched or rubbed. Urticaria.
- **Pathergy test:** erythematous induration of the site of the needle stick with a small sterile pustule at the center. Behcet's disease. Pyoderma gangrenosum.



Pemphigus vulgaris



atopic dermatitis



Erythematous rosacea



Pyoderma gangrenosum.



Behcet's disease

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## *History*

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- How long have skin lesions been present. Acute, subacute, chronic.
- Where did the problem first appeared?
- Progression of the problem.
- Any other symptoms like pruritus.
- Treatment history.
- General relevant medical history.
- Occupational and recreational history.
- Travel.
- Family and household contact history.

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## *Examination*

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- **Full skin** examination should be carried out to determine the full extent of the problem and possible unrelated conditions.
- Examination should be done in a **good light**, better natural sun light.
- Skin, nails, hair, mucous membranes should all be examined.
- General appearance of the patient must be assessed.
- **Lymph node** exams in selected diseases like mycosis fungoides and skin cancers.
- Wood's lamp, dermoscope, photography and other office based test like KOH preparation could help in diagnosis and follow up.

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## *Description of Skin Lesion*

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- **Type** (primary or secondary), **shape, size, color**, arrangement of lesions, distribution and configuration of the lesions all must be addressed while describing a lesion.
- **Distribution:** symmetrical, asymmetrical, unilateral, bilateral, diffuse, universal.
- **Site** of involvement: flexor, extensor, inverse, seborrheic, acral, photodistributed.
- **Configuration:** linear, grouped, reticular, annular, circular, arciform, dermatomal, koebnerization.

### Summary

#### Primary skin lesion features:

- ❖ Macule is small, flat, colored skin; Patch is bigger.
- ❖ Papule and plaque are elevated; Nodule have a depth.
- ❖ Vesicle is small, containing fluid; Bulla is bigger.
- ❖ Purpura is collection of blood; Telangiectasia is dilated capillaries.

#### Secondary skin lesion features:

- ❖ Scale is detached fragment of stratum corneum.
- ❖ Excoriation is a shallow abrasion; Lichenification is a thickening and pigmentation.
- ❖ Erosion depressed lesion with loss epidermis; Ulcer a hole with destruction of epidermis and dermis.

# Questions

**1- In which disease we see Nikolsky's sign:**

- a- Behcet's disease
- b- Psoriasis
- c- Rosacea
- d- Pemphigus Vulgaris

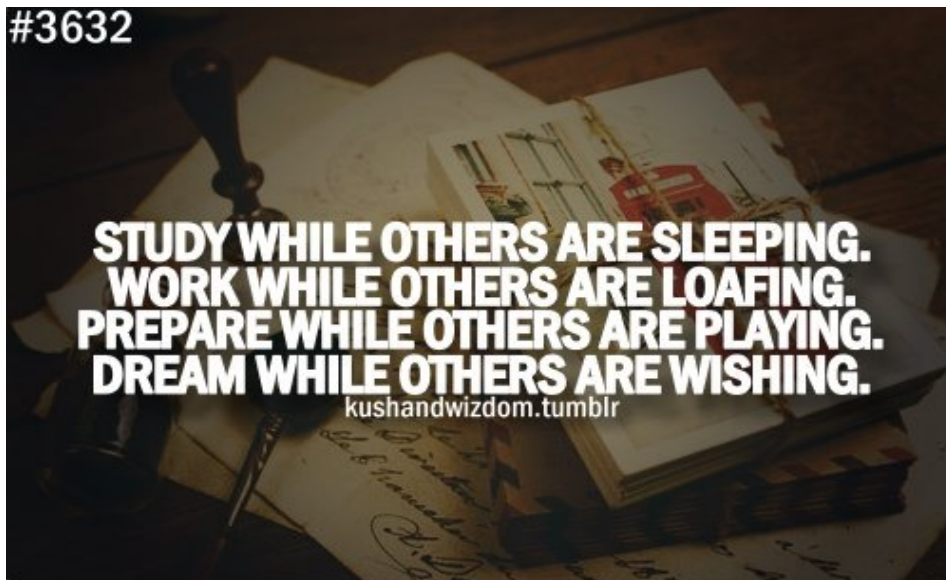
**2- Which of the following is secondary lesion:**

- a- Telangiectasia
- b- Purpura
- c- Scale
- d- Cyst

**3- A moist, circumscribed, usually depressed lesion that result from loss of all a portion of the epidermis:**

- a- Ulcer
- b- Erosion
- c- Fissure
- d- Poikiloderma

#3632



Answers:

- 1- D
- 2- C
- 3- B