

Case Report

“SWAB-ABLE” DERMATOSES-ARTIFICIAL LESION WITH STAIN AND TERRA FIRMA FORME: TWO CASES

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ABSTRACT

Terra firma-forme dermatosis is a benign skin condition that presents as dirt-like plaques in patients of all ages. In addition, psychocutaneous conditions are rare in the pediatric population and may therefore be misdiagnosed. We describe a case of a 15 year-old girl diagnosed with terra firma-forme and a 13 year-old girl with mental retardation who stated that she had intraocular bleeding every morning and for whom artificial lesion was formed with stain in the orbita.

Key words: Terra firma forme, artificial lesion, stain, swab-able dermatoses

ÖZET

Terra firma-forme kirli görünümlü plaklarla kendini gösteren, her yaş grubunda ortaya çıkabilen benign bir dermatozdur. Ek olarak psikokutanöz bozukluklar pediatrik popülasyonda nadir görülürler ve bu nedenle tanı güçlükleri yaşanabilir. Biz terra firma-forme tanısı alan 15 yaşında bir kız çocuğunu ve mental retardasyonu olan göz çevresinde kanama şikayeti ile başvuran ve boyaya bağlı artifisyonel lezyon tanısı konan iki olguyu paylaşıyoruz.

Anahtar kelimeler: Terra firma forme, artifisyonel lezyon, boya, silinebilir dermatozlar

INTRODUCTION

Terra firma-forme (TFF) is a dermatosis characterized by hyperpigmentation that creates patches with dirty appearance. Terra firma-forme, although well known by dermatologists, has a limited number of cases published academically. TFF is an important dermatosis in terms of the diseases with a differential diagnosis. It is also possible to see artificial clinical

pictures in the dermatology practice. We report case of a 15 year-old girl diagnosed with TFF and a 13 year-old girl with mental retardation who stated that she had intraocular bleeding every morning and for whom artificial lesion was formed with orbital staining.

CASE REPORT

Case 1. Thirteen year-old girl was referred to our outpatient clinic for consultation because no pathology was determined for the eyes at the ophthalmology outpatient clinic to which she applied due to the complaint of recurrent redness around the eye. Her mother told that this redness has repeated 4-5 times in the last one year, occurred instantly around the left or right eye, and recovered by itself by slowly fading within 5-6 days. Her hesitant and reluctant attitudes to talk were remarkable while taking the medical history of the

patient. During dermatological examination, a red-pinkish colored color change which was located in an approximately 7x8 cm area around the right eye and the eyebrow was observed. Upon noticing the irregular circumscribed color change that was observed as if occurred with a fluid flow in an area around the eyebrow, it was observed that the color faded by swabbing the lesion with the help of a sponge and alcohol with the opinion that it could be an exogenous staining (Figure 1).



Figure 1. Clinical manifestation of case 1 and paint on dressing material.

Her mother told that she abstained from cleaning events such as washing her face

and taking a bath in the period when these lesions occurred. The case was considered

as an artificial dermatosis. Consultation at the child psychiatry outpatient clinic was recommended for the patient with her family. The patient has been still under follow-up and treatment at the child psychiatry outpatient clinic due to the presence of slight mental retardation, decreased self-esteem and mild depressive episode diagnoses.

Case 2. Fifteen year-old girl applied to our outpatient clinic with complaint of a brown color change that appeared on the

abdominal area within the last one month. In her history, she had underwent a surgical operation two months ago due to scoliosis and then she used a corset and did not take a bath for approximately one month. In her dermatological examination, there was hyperpigmented lesions with dirty appearance that had a dark brown in some spots and a light brown in some spots in an approximately 25x20 cm² area spreading from the lower part of the breasts till around the middle (Figure 2).



Figure 2. Clinical manifestation of case 2; dirty appearance on the trunk

Upon considering terra firma-forme dermatosis, it was observed that the lesions disappeared by being swabbed with

70% isopropyl. A lotion containing 10% urea and a light rubbing process at the bath were recommended for the patient. The

patient had no complaint in her control 10 days later.

DISCUSSION

Definition of factitial dermatitis in our first case was used to identify a unique entity that is examined under the heading of psychocutaneous dermatoses. It is a rare artificial disorder having various morphological characteristics that were formed by the patient consciously or unconsciously.^{1,2} It is seen as instantly occurring, single or multiple, mostly asymmetric, sharply circumscribed, geometrical, linear, irregular shaped, unnatural lesions.^{2,3} They do not look like the known dermatological disease lesions. Lesions are generally present in areas such as face, body, extremities where the dominant hand can easily reach.^{1,2,4} It mostly appears as a behavior triggered by psychological stress and physical, emotional or sexual abuse histories of the patients can be taken and personality disorders can be seen.³ Since it has a differential diagnosis with most dermatoses and other psychocutaneous diseases it can mimic, dermatological and psychiatric approach are important.^{1,2} While the incidence of the disease is not exactly known, its prevalence varies between 0.6% and 13.3%. Although the age

of onset varies (the ages of 10-13), a great majority of the cases are females under 30 years.^{2,3} The patients refuse that the lesions are formed by them and they do not want to recover. The patients need their diseases and they intend to obtain secondary emotional acquisitions. Medical history is not very guiding in diagnosis. Most of the patients, asserting that the lesions occur instantly and with the appearance at the moment of recognition, either hide the development and course of the event or few of them are mentally retarded patients who are really unconscious of the formation of the lesion.^{2,4}

Terra firma-forme dermatosis (TFFD) in our second case is a dermatosis characterized by hyperpigmentation developing dirty-appearance patches.⁵⁻⁷ Although there are a limited number of cases published academically, it is an important dermatosis in terms of the diseases with a differential diagnosis. Although the etiology of TFFD is not exactly known, it is thought that it may be associated with the delay in keratinocyte maturation and sweat, sebum, and microorganism accumulation

with melanine. As a result of these accumulations, dirty-appearance squamous exfoliating are formed. TFFD is mostly seen in children and young adults on the face, neck, and wrists. It can also be present in people living under normal hygiene conditions, and medical history of sheltering or not being able to bath/ not bathing can be taken from the patient.^{5,7}

TFFD can be involved in differential diagnosis with dermatoses such as confluent and reticular papillomatosis, acanthosis nigricans, pityriasis versicolor, ichthyosis and postinflammatory hyperpigmentation.^{1,4} Disappearance of the lesions by being swabbed with 70% isopropyl alcohol is its typical characteristic.^{6,8}

CONCLUSION

Early and true diagnosis in "Swab-able" dermatoses will prevent unnecessary examinations and treatments. Thus, follow-up and treatments of the patients,

especially in childhood and when it is artificial, should be managed in cooperation with especially the dermatology and psychiatry specialists.

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