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Acanthosis nigricans

Shuba Dharmana
Lejeune Medspa, India

Acanthosis nigricans is a condition involving symmetrical hyperpigmentation and thickening of the skin in the flexures like neck, axilla and groin. It is strongly associated with insulin resistance, obesity, polycystic ovarian syndrome and some malignancies. It is important to screen people with AN for insulin resistance and advocate lifestyle changes, weight reduction etc to reduce the risk of diabetes and its complications. Whilst underlying causes need to be corrected, lightening of the patches poses a problem. It is often resistant to treatment and recurrence is common. A variety of topical skin lightening agents like hydroquinone, azelaic acid, triple combination cream, chemical peels, keratolytic agents like salicylic acid, emollients, calcipotriol, metformin, octreotide, oral and topical retinoids, CO₂ ablation, long pulsed alexandrite laser are all used to improve appearance.

sdharmana@gmail.com

Case of adult onset verrucous epidermal nevi

Sushma Yadav and Shuba Dharmana
Lejeune Medspa, India

Epidermal nevi are hamartomatous proliferation of the epithelium including the keratinocytes, sebocytes, pilosebaceous units, eccrine glands or apocrine glands. Epidermal nevus present with developmental abnormalities of the nervous, cardiovascular, urogenital and skeletal system. Also called as linear verrucous epidermal nevus, they are characterized by localized or diffuse, close-set, skin colored, brown to gray brown verrucous papules, which may coalesce to form well demarcated papillomatous plaques. Variants localized, systematized, nevus uniuslateris, ichthyosishystrix and inflammatory type. Eighty percent of the lesions appear within the first year of life with majority of the lesions appearing by the age of 14. There are rare reports of adult onset of epidermal nevi, therefore presenting a case of epidermal verrucous nevi in a 32 year old male patient with adult onset.

sushma2185@gmail.com