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The Presentation of Cutaneous Sarcoidosis

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Sarcoidosis is an autoimmune, granulomatous disease that affects multiple body systems. Commonly, patients present with dyspnea, cough, painful joints, and lymphadenopathy. Sarcoidosis is frequently discovered through additional workup, involving chest CT showing hilar lymphadenopathy and consolidations or masses within the lungs. However, the primary presentation of sarcoidosis may be with cutaneous skin lesions. Our patient had a known history of sarcoidosis and presented to the clinic with two cutaneous nodules located on the lower back and right thigh. Biopsies were performed on both lesions and results were significant for cutaneous sarcoidosis on pathology. Subsequently a chest CT was completed, which was suggestive of pulmonary sarcoidosis, and the patient was referred to pulmonology. Cutaneous manifestations may be the initial presenting manifestation of sarcoidosis, as seen in our patient. Up to 20-35% of patients diagnosed with sarcoidosis have cutaneous manifestations and this may occur without other systemic involvement, such as dyspnea or cough.¹ Due to the absence of other systemic symptoms that may increase clinical suspicion for sarcoidosis, it is imperative for physicians to recognize the cutaneous nodules and to keep sarcoidosis on their differential diagnosis for further workup. The absence of typical presenting symptoms can delay diagnosis and treatment in these patients, making the recognition and biopsy of cutaneous lesions crucial for diagnosis of cutaneous sarcoidosis.

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