A Case of Progressive Elephantiasis Nostras Verrucosa

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An obese 83-year-old woman with hypertension was managed to control severe progressive leg edema with recurrent leakage of exudates for two years (Picture 1). There was no evidence of an intrapelvic mass, deep venous thrombosis or congestive heart failure. A blood examination did not show any abnormalities, except for low-grade non-specific inflammation. Tests of the thyroid function and serological parameters were also normal.

Elephantiasis nostras verrucosa is a rare dermatologic condition primarily attributed to the effects of chronic lymphedema with a variety of etiologies, including obesity (1). Affected patients present with a constellation of verrucose and hyperkeratotic papules exhibiting a typical cobblestone-like appearance (Picture 2, 3) that are often complicated by...

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recurrent skin infections. It has been postulated that the protein-rich lymphatic fluid present in the interstitium decreases the local immune response and thus predisposes the patient to skin infections that further provoke the onset of subcutaneous fibrosis (2). Magnetic resonance imaging (T1) reveals a characteristic complex honeycomb structure containing thickened subcutaneous tissue (Picture 4).

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References
