[PICTURES IN CLINICAL MEDICINE]

Syphilitic Rash in a Non-HIV Female Patient

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Key words: female, skin rash, secondary syphilis

(Intern Med 58: 1799, 2019)

(DOI: 10.2169/internalmedicine.2404-18)

Picture 1.

Picture 2.

A 31-year-old woman visited a hospital for the evaluation of a refractory skin rash. She recalled that the rash initially started from her abdomen but now involved her palms and soles. A total of six visits to three different hospitals failed to achieve a definitive diagnosis. An examination showed generalized maculopapular eruption (Picture 1, 2) with no mucocutaneous oral or genital lesions. History-taking revealed that she had started to work as a commercial sex worker three months prior to developing the rash. The rapid plasma reagin (RPR) test and *Treponema Pallidum* latex agglutination (TPLA) assay were both positive, confirming the diagnosis of syphilis, but negative for HIV. During the clinical course, her male partner also developed a skin rash that was later confirmed to be syphilis. The number of syphilis patients in Japan has sharply increased recently in not only men by women as well (1, 2). Physicians should be aware of this typical rash for a rapid diagnosis, as a delay may

lead to the spread of the infection as well as an increased risk of congenital syphilis.

The author states that he has no Conflict of Interest (COI).

References

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Received: November 19, 2018; Accepted: November 29, 2018; Advance Publication by J-STAGE: February 1, 2019

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