Preauricular Vertical Creases

Taro Shimizu and Yukinori Harada

Key words: Bedside teaching, Physical diagnosis

A 73 year-old-man with a history of coronary artery disease (CAD) presented with cellulitis. On examination, Frank’s sign was noted bilaterally. He also showed preauricular vertical creases bilaterally (Picture). Frank’s sign has been reported to be a consequence of an inadequate blood supply to the earlobes lacking end arteries or the rupture and degeneration of elastin fibers in the earlobes; it is related to CAD with a sensitivity of 62% and specificity of 67%. (1) Frank’s sign is said to be less common in Asian populations than in Westerners. (2) Nevertheless, this sign can be useful, especially in young patients suspected of having CAD. Preauricular vertical creases are frequently seen with Frank’s sign. As in Frank’s sign, preauricular vertical creases are believed to be associated with the loss and degeneration of elastin and tears in the dermal and vascular elastic fibers. This sign can be a substitute finding to Frank’s sign, especially when patients have pierced ears for earrings.

The authors state that they have no Conflict of Interest (COI).

References
