

# Porokeratosis: A diagnosis made easy by the dermoscope!

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Sir,

A 56 year-old woman with no medical history presented with an asymptomatic lesion on her right thigh that had been evolving for 20 years. Clinical examination showed an oval shape plaque ; with a slightly erythematous atrophic center surrounded by a hyperkeratotic border (Fig. 1). On dermoscopy, we found a diffuse brown central area of atrophy bounded by irregular double-



**Figure 1 :** An oval shape plaque; with a slightly erythematous atrophic center surrounded by hyperkeratotic border on the right thigh.



**Figure 2 :** A diffuse brown central area of atrophy bounded by irregular double-marginated white track (arrow).

marginated “white track” border (Fig. 2) consistent with the diagnosis of porokeratosis of Mibelli.

Porokeratoses (PK) are a group of disorders of keratinization characterized by annular lesions surrounded by a characteristic keratotic border which corresponds to a typical histopathologic feature, namely, the coronoid lamella. Though no pathognomonic, the coronoid lamella is the most distinctive feature of the various types of porokeratosis [1]. Dermoscopy is very useful because it reveals specific diagnostic criteria : A peripheral white rim, corresponding to the coronoid lamella, which is the dermoscopic hallmark of porokeratosis [2]. This criteria allows us to confirm the diagnosis without resorting to histology.

## CONSENT

The examination of the patient was conducted according to the principles of the Declaration of Helsinki.

## REFERENCES

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