

A dahlia like pattern: A new dermoscopic sign of filiform wart

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Sir,

Warts are common benign epidermal proliferations caused by various strains of human papillomavirus. Dermoscopic examination of these lesions may help to distinguish them [1]. Filiform warts are small, finger-like, and pedunculated [2]. They often appear in periorificial areas, mostly in children or in the beard area of men [3]. They are usually treated with surgical removal or cryotherapy. We report a case of a descriptive dermoscopic image of a filiform wart in a young moroccan male [2].

Our patient is a 36 years old male, without antecedents, who presented a rounded papular keratosic red lesion of the right arm (fig 1), evolving since 1 year. Dermoscopic examination found a flower-like pattern (fig 2), more precisely a dahlia-like pattern (fig 3), with a tapered fingerlike pattern (black arrow) and a keratosic white tip (red arrow) and pigmented zones (white arrow).

We have done a complete exeresis of the lesion. Histological examination showed an acanthotic epidermis surmounted by a focal parakeratotic and orthokeratotic hyperkeratosis.

Recently, a study including a large number of patients identified four dermoscopic patterns that may also coexist in a single wart: unspecific, fingerlike, mosaic and knoblike patterns. Glomerular, hairpin/dotted, and glomerular/dotted vessel morphologies were also described [1].



Figure 1: Papular keratosic red lesion of the right arm.

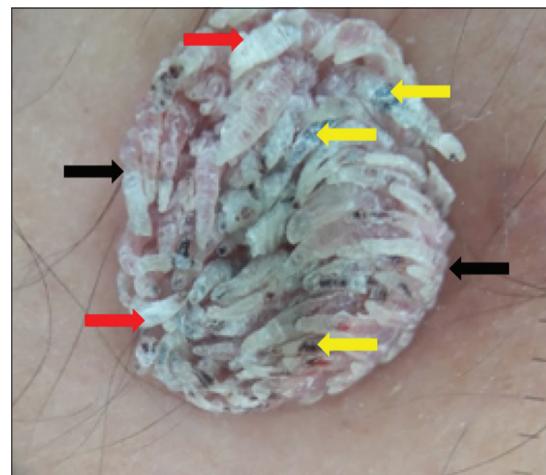


Figure 2: Dermoscopic examination found a flower-like pattern: Dahlia-like pattern. Black arrow: tapered fingerlike pattern; Red arrow: keratosic white tip; White arrow: pigmented zones.

For filiform wart, dermoscopy shows the same features as common warts, with more prevalent papillae.

How to cite this article: Khouna A, Aburabie H, Daflaoui H, Zizi N, Dikhaye S. A dahlia like pattern: A new dermoscopic sign of filiform wart. Our Dermatol Online. 2021;12(e):e47.

Submission: 28.03.2021; **Acceptance:** 27.08.2021

DOI: 10.7241/ourd.2021e.47



Figure 3: Dahlia flower.

Dotted vessels are detectable at the extremities of each papilla [3].

Filiform warts are often treated with surgical intervention via a “snip excision” using surgical scissors or shave removal. Additionally, snip excisions have the potential to scar and are undesirable, especially if the patient

has a known history of keloid formation. Another commonly used treatment modality for filiform warts is cryotherapy. Similarly, podophyllum, cantharidin, and chemical peels may be used, but such therapies carry a significant risk of hyperpigmentation and blistering.

A combination of 5-FU 5% and salicylic acid 20% achieved a greatest treatment response [2].

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Source of Support: Nil, **Conflict of Interest:** None declared.