

MAYERSON'S PHENOMENON IN A CUTANEOUS NEUROFIBROMA

ZJAWISKO MEYERSONA W PRZEBIEGU NERWIAKOWŁÓKNIAKA

Iffat Hassan, Peerzada Sajad

*Department of Dermatology, STD & Leprosy, Government Medical College
Srinagar, University of Kashmir, J&K, India*

Corresponding author: Ass. Prof. Iffat Hassan

hassaniffat@gmail.com

Our Dermatol Online. 2012; 3(3): 227

Date of submission: 15.01.2012 / acceptance: 28.02.2012

Conflicts of interest: None

We report the case of a 45year old normotensive, nondiabetic, policeman, smoker who presented with a two week's history of red crusted scaly lesion around a skin coloured pedunculated growth over the back. There was associated history of severe itching, but no history of trauma, pain, bleeding, application of any substance or any constitutional features. Examination revealed a well-defined annular moist erythematous scaly crusted plaque around a skin coloured nodule (neurofibroma) which had been present on the back for the past 30 years. There were multiple neurofibromas present over the back and abdomen. Besides routine testing, punch biopsy was taken for histopathological examination. Histopathology of the specimen showed spongiosis with lymphocytic infiltrate and few eosinophils

which confirmed the diagnosis of mayerson's phenomenon. Topical steroid (clobetasol propionate, l/a b.d) and an antihistaminic (levocetirizine 5m b.d) was prescribed and the condition resolved in a week (Fig 1, 2).

Discussion

Mayerson's phenomenon is an uncommon clinical condition that is characterised by an eczematous halo surrounding a pre-existing melanocytic naevus, and numerous other lesions like molluscum contagiosum, skin tags, seborrheic warts and other elevated skin lesions. The etiology of this condition is unknown. It is hypothesised that it occurs because of the interaction between CD4+T lymphocytes and increased expression of ICAM-1.



Figure 1. Mayerson's phenomenon



Figure 2. 1 week after the application of topical steroid