

Erythema ab igne at an unusual location. Triggering factors revisited

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Sir,

A 21-year-old woman with an unremarkable medical history, 1.72 m, 87 kg, consulted for lesions that appeared a week prior to consultation. Clinical examination revealed symmetrical, reticulated, pigmented rash below both breasts (Figs. 1a and 1b). The clinical diagnosis was compatible with erythema ab igne. No additional laboratory examinations were conducted as the etiology of the rash was evident, and the clinical condition of the patient was excellent. The patient, while the external temperature exceeded 40°C, had been working on two computers simultaneously, therefore, excessive heat is considered to be linked with the development of erythema ab igne.

This dermatological condition manifests with the appearance of reticulated pigmented rash in parts of the body following exposure to excessive heat [1,2]. Predilection sites include the back, where heaters are usually applied, the abdomen, the inner surface of thighs, and the upper arms and lower legs. Breasts are an unusual site. Erythema ab igne has been reported in patients using laptops in contact with the affected areas [3]. Although affection is benign, associations with autoimmunity as well as malignant transformation to squamous cell carcinoma have been described in the literature [4,5].

While not mentioned, a thorough review of the literature revealed that most patients presenting with erythema ab igne are females. This might be explained by hormonal changes that provoke alterations in thermoregulation in females. Obesity observed in the reported patient, 1.72 m, 87 kg, might have contributed to the development of erythema ab igne, as excess

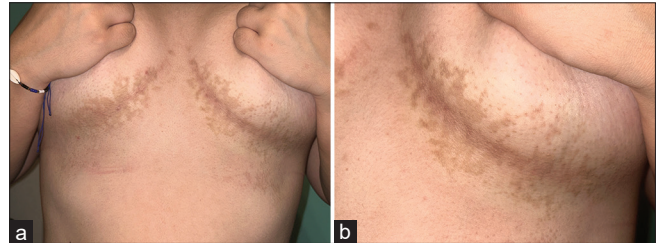


Figure 1: a) Erythema ab igne on and below both breasts. b) Erythema ab igne on and below the left breast.

fat leads to diminished heat elimination. Another publication reported three cases of erythema igne occurring in three girls with anorexia nervosa [6]. It is known that anorexia nervosa is associated with weight loss, intolerance to cold vasoconstriction, and increased need for heat. The assumption that both an excess in body weight or emaciation may be associated with the development of erythema ab igne should be taken into account. This case is reported because of the unusual location of erythema ab igne (no case on and below the breasts was found in the literature) and to increase awareness of physicians about the possible associations of the affection with either excessive or diminished body weight, especially in female patients.

Consent

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

The authors certify that they have obtained all appropriate patient consent forms, in which the patients gave their consent for images and other clinical information to be included in the journal. The patients understand that their names and initials will not be published and due effort will be made to conceal their identity, but that anonymity cannot be guaranteed.

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