CLINICAL CASE VIGNETTES

Generalized morphea: A rare variant of localized scleroderma

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Morphea, a rare type of localized scleroderma, is a fibrosing disorder of skin and subcutaneous tissue. It has a bimodal presentation and is common in both children and adults. The patient may show positivity for antinuclear antibodies, rheumatoid factor, or antibodies to ssDNA. The disease lesions rarely undergo spontaneous resolution. The below given images depict the diverse disease presentations observed in a 35-year-old female affected with generalized morphea. The patient was having a history of skin thickening and discoloration over her forearms since 3 years. Physical examination revealed the occurrence of new lesions on the arms, abdominal surface, and legs. The patient fulfilled the Padua preliminary classification criteria for generalized morphea (≥4 large plaques and each >3 cm) on at least 2 of 7 anatomic areas: head/neck, right upper extremity, left upper extremity, right lower extremity, left lower extremity, anterior trunk, posterior trunk.[1] She had no active arthritis or myositis, though she complained of multiple joint pains. Her ANA was positive (1.9) and skin biopsy showed thick collagen deposition in dermis, flattened epidermis, and no inflammatory infiltrates.

Fig 1:Circumferential skin thickening over both the forearms

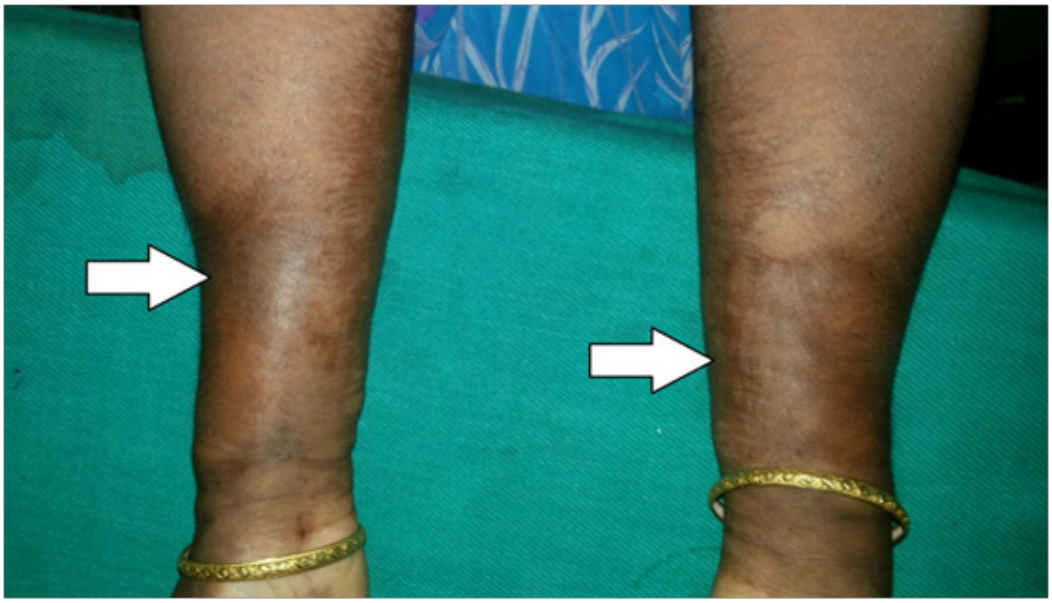


Fig 2: Multiple thickened skin lesions over both the legs

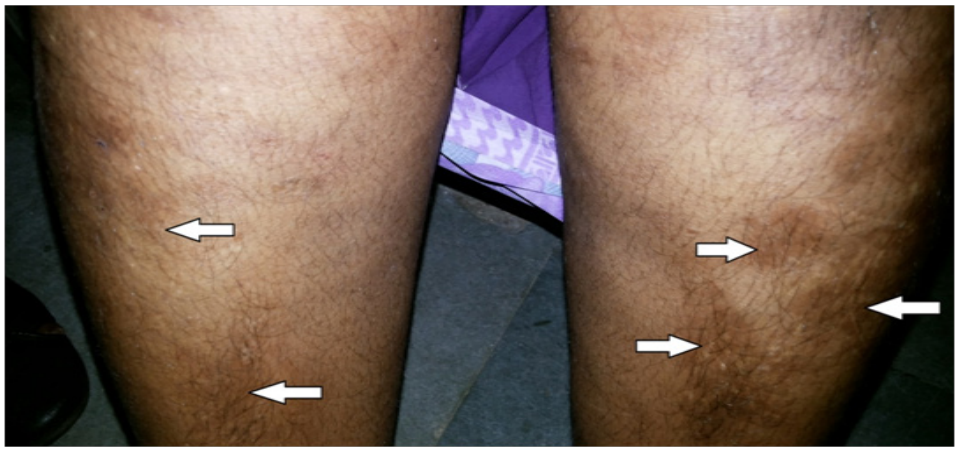


Fig 3: Thickened, shiny skin lesions over abdomen

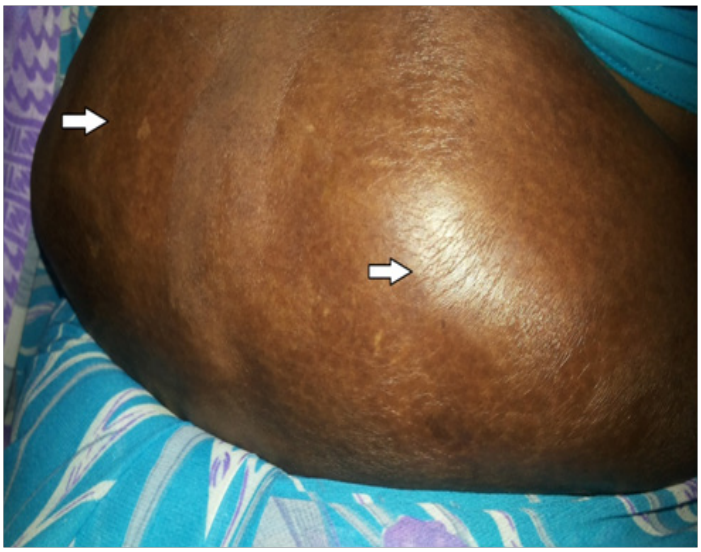
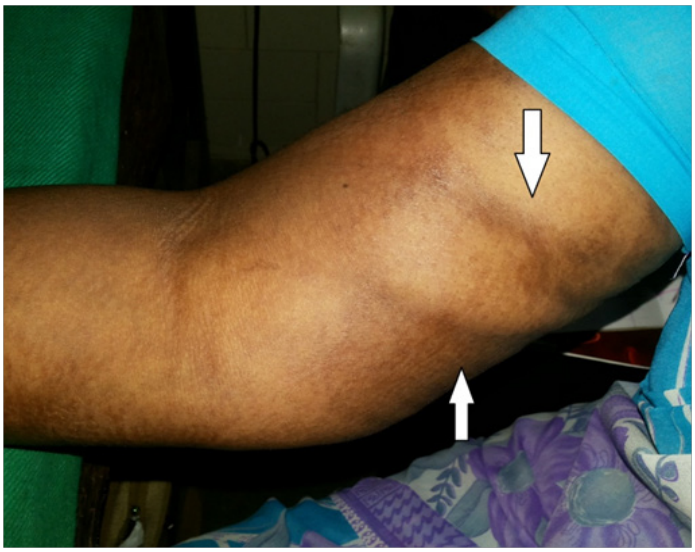


Fig 4: Linear and thickened skin lesions over right arm



Reference

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Competing interests

The authors declare that they have no competing interests.

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