DERMATOFIBROMA
CASE REPORT

A 29 year-old white male presents with multiple small erythematous warts on the sole of the R foot.

It has been present for over one year and appears to have enlarged recently.

It bleeds and does not respond to different forms of wart treatments.

Patient states no other skin problems.
WHAT IS THAT LESION?

Multiple Small Warts on Plantar Foot:
Treated by PCP with Topical Acid with
No Response
Patient was asked about other dermatology or skin conditions and stated none were present!

LOWER BACK
WHAT IS THAT LESION?

GUTTATE PSORIASIS: Always remember to check the rest of the patient. Other lesions may be present, especially on the trunk.
WHAT IS THAT LESION?

PSORIASIS TREATMENT:
1. Difficult: Instruct patient to stop rubbing/scratching (Koebnerization)
2. Cover area and protection with cotton gloves at night
3. Remove Scales with 50% urea
4. Topical Steroid (betamethasone valerate 0.12% foam) during day
5. Topical Steroid Tape (Cordran®) at night.
6. Injectable Steroid (betamethasone or triamcinolone acetonide) for problem lesions
7. Topical Immune Modulators (pimecrolimus: Elidil® or tacrolimus: Protopic®)
8. Topical 5% imiquimod cream (Aldara®)
9. Treat with OLUX-E®Stiefel (clobetasol propionate 0.05%).
CASE REPORT

A 60 year-old white male presents with an elevated wart on the lateral aspect of the R foot.

It has been present for over one year and appears to have enlarged recently.

It bleed and does not respond to different forms of wart treatments by non-foot specialists and OTC products by patient.
WHAT IS THAT LESION?

60 y.o. male with dome-shaped well-circumscribed wart on lateral L foot which is raised and with a crusted center.
WHAT IS THAT LESION?

**KERATOACANTHOMA (KA):** solitary and giant (>1.0 cm). Develops a central keratin-filled plug that may crust over. Treatment: surgical excision with flap closure.

**DDx:** Verrucous Carcinoma

WHAT IS THAT LESION?

Look at the entire extremity and other areas of the body!
A 22 year-old white male presents with an elevated wart on the dorsal aspect of the second toe, R foot.

It has been present for over one year and appears to have enlarged recently.

It bleeds when trimmed.
WHAT IS THAT LESION?

Dome-shaped papular wart with central umbilication with mildly erythematous base located on distal 2\textsuperscript{nd} toe.
WHAT IS THAT LESION?

MOLLUSCUSM CONTAGIOSUM: Viral poxviridae, central umbilicated dome-shaped lesions. Very contagious. Treated similar to warts.

CASE REPORT

A 20 year-old white female presents with an elevated wart on the dorsal aspect of the second toe, R foot.

It has been present for over one year and appears to have enlarged recently.

It does bleed when trimmed and has not responded to topical wart acids.
WHAT IS THAT LESION?

20 y.o. female: wart treated with acid for 4 weeks. No response.
WHAT IS THAT LESION?

DIGITAL MUCOID CYST:
These myxoid cysts are commonly seen on the toes and contain a thick mucinous fluid. Their appearance may change with other treatments.
DIGITAL MUCOID CYSTS

TREATMENT OPTIONS:

- Puncture & Drain (I&D)
- Unroofing – Electrodessication
- Injections: Steroid – Sclerosing Solutions
- Curettage & Compression
- Multiple Needlings & Drainage
- Simple/Complete Surgical Excision & Skin Flap
- Tying Off Stalk and Skin Flap

A 27 year-old white male presents with a plantar wart on the plantar aspect of the left heel.

It has been present for four weeks and appears to have enlarged recently.

It does bleed when trimmed and the patient wants it treated today.
WHAT IS THAT LESION?

WHAT IS THAT LESION?

FOREIGN BODY REACTION: Many foreign body reactions look similar on the plantar foot and may be mistaken for warts. Human or pet hair, wood splinters, carpet fibers, other reactive materials, etc.
CASE REPORT

A 55 year-old white female presents with a plantar wart on the plantar aspect of the L foot.

It has been present for many months and appears to have thickened recently.

It does not usually bleed when trimmed and the patient wants it treated today.
WHAT IS THAT LESION?

Painful Plantar Wart: Treated with OTC Wart Acids.
WHAT IS THAT LESION?

PLANTAR KERATOMAS, TYLOMNAS AND CALLUSES: Commonly misdiagnosed by Family or General Practice Physicians. Treatment: debride, pad, accommodate, orthotic devices.
A 50 year-old white male presents with painful plantar warts on the both feet.

They has been present for many years and appears to have increased in numbers recently.

It does not usually bleed when trimmed.
WHAT IS THAT LESION?

Painful Plantar Warts: Ball of left foot.
WHAT IS THAT LESION?

PUNCTATE KERATOMA & KERATODERMAS: All of the smaller punctate keratomas may be misdiagnosed as plantar warts. Treat with debridement/emollients; cryotherapy; 4% alcohol injections; or, excision.
CASE REPORT

A 50 year-old white male presents with painful plantar warts on the both feet.

They has been present for many years and appears to have increased in numbers recently.

It does not usually bleed when trimmed.
WHAT IS THAT LESION?

Plantar Heel Wart: Just noticed last week.
**WHAT IS THAT LESION?**

**TALON NOIR:** Black Heel Syndrome – irregular punctate hemorrhage due to sudden shear forces seen in running & other sports. No definitive edge noted.

WHAT IS THAT LESION?

Longstanding Plantar Wart on Right Foot (4 mm diam)
NOT EVERYTHING IS A WART

CARCINOMA: Both superficial Basal Cell and Squamous Cell Ca can mimic plantar warts.
Not Everything is a Wart: But These All Are!

Variegated

Vulgaris

Planar

Digitate

Subungual

Mosaic
Not Everything is a Wart!

Don’t Always Put Warts at the Top of the Differential Diagnosis Lists

Think About Other Stuff As Well

Do Good Exam & Tests: Debride Carefully, Take Specimen(s), Biopsy Lesion(s)

If Your Treatment is Not Successful in a ‘Reasonable’ Amount of Time….Look at a Different Diagnosis

The End
Additional References: