

Porokeratosis (REPORT OF TWO CASES)

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Introduction

porokeratosis is an autosomal dominant inherited keratoatrophoderma with a variety of manifestations. It is characterized by a distinct peripheral keratotic ridge that corresponds histologically to the coronoid lamella. Five different forms can be distinguished:- 1) The plaque type classical porokeratosis of mibelli, 2) disseminated superficial actinic porokeratosis, 3) linear porokeratosis, 4) porokeratosis palmaris, plantaris et disseminata and 5) punctate porokeratosis.

Only a few cases of porokeratosis have been reported from India. two cases of punctate porokeratosis with palmaris plantaris et disseminata are reported

Case Reports

Case-I a 50 year old man was seen for multiple



asymptomatic, discrete hard papular lesions on both palms and plantar aspects of all fingers of ten years duration. Two years after he noticed multiple small circular plaques appearing over chest abdomen and back in span of four years. The lesions were asymptomatic as such, except that he had some problem in walking barefooted because of lesions on the soles. Examination revealed numerous hyperkeratotic punctate pits on palms and soles. All routine investigations were within normal limits. No other family member had similar lesions. Histology from edge of lesions showed hyperkeratosis and parakeratotic column in epidermal invagination.



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A 45 year old women presented with multiple asymptomatic, discrete hard papular lesions on both palms and plantar aspects of all fingers of ten years

duration. Five years after he noticed multiple small circular plaques appearing over chest, lower legs and back. The lesions were asymptomatic examination revealed numerous hyperkeratotic punctate pits on lower legs, back, palms and medial aspects of soles. All routine investigations were within normal limits. no other family member had similar lesions. Histology from edge of lesions showed hyperkeratosis and parakeratotic column in epidermal invagination.

Discussion

Porokeratosis is an inherited disorder of keratinisation. although it is presumed to have an autosomal dominant mode of inheritance, numerous nonfamilial cases have been reported. No family history

could be elicited in these two cases. Sporadic cases are probably the results of somatic mutation. Despite many morphological forms of porokeratosis, it has been suggested that similar histology as well as the co-existence of different variants in a single patient or within different phenotypic expressions of a common genetic disorder. Punctate porokeratosis is a rare variety may be confused clinically with arsenical keratoses, pitted keratolysis, warts and variety of other keratinizing disorder. The premalignant potential of classical and disseminated porokeratosis is well known. Histopathologically, no evidence of malignancy was noted.



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