

RESIDENT ROUNDS: PART II

Board Review: A List of the Most Common Associations in a Variety of Dermatologic Conditions

Mary E. Horner MD

Department of Dermatology, Baylor University Medical Center, Dallas, TX

ABSTRACT

With the wide breadth of knowledge tested in the board and in-service exams, Baylor University Medical Center Dermatology residents focus their study on the most common causes, sites, and types of conditions. While the entire list of associations is vital for clinical practice, it is often these “most common” associations that are tested on exams.

Most Common Site For:	Is:
Melanoma in an African American	Foot
Malignant fibrous histiocytoma	Extremities (more specifically, the thigh)
White sponge nevus	Buccal mucosa
Acanthosis nigricans	Axillae
Branchial cyst	Lateral neck
Dermoid cyst	Lateral eyebrow
Black piedra	Scalp
Intraoral nevi	Palate
Arterial thrombosis from sclerotherapy	Medial malleolus
Necrosis after filler injection	Glabella
Subcutaneous panniculitis-like T-cell lymphoma	Lower extremities
Enthesitis in psoriatic patients	Achilles tendon
Hypertrophic lichen planus	Lower extremities

Most Common Side Effect of:	Is:
Etanercept	Injection site reaction
Spirolactone	Hyperkalemia
Isotretinoin (lab abnormality)	Elevated triglycerides
Rifampin	Orange-red discoloration of urine and tears
Dapsone	Hemolytic anemia
Colchicine	Gastrointestinal upset
Thalidomide	Sedation

Most Common Cause of:	Is:
Chromomycosis	Fonsecaea pedrosoi
Mycetoma in the United States	Pseudallescheria boydii
Deep fungal infection	Sporotrichosis
Sporotrichoid pattern of spread	Nocardia
Tinea capitis worldwide	Microsporum canis
Tinea capitis in the United States	Trichophyton tonsurans
Dermatophyte worldwide	Trichophyton rubrum
Arthropod-borne disease worldwide	Dengue virus
Gionatti-Crosti worldwide	Epstein Bar Virus
Verruca vulgaris (common warts)	Human papilloma virus 2
Acute paronychia	Staphylococcus
Congenital viral infection	Cytomegalovirus
Death in churg-strauss	Congestive heart failure
Erythema gyratum repens	Lung carcinoma
Photoallergic contact dermatitis	Oxybenzone (benzophenone)
Irritant contact dermatitis in a florist	Oxalate alkaloids in daffodils
Allergic contact dermatitis in a florist	Sesquiterpene lactone (chrysanthemum)
Allergic contact dermatitis from fragrance	Cinnamic aldehyde
Complex aphthosis	Inflammatory bowel disease
Stevens-Johnson syndrome/toxic epidermal necrolysis	Allopurinol
Drug-induced dermatomyositis	Hydroxyurea or statins
Drug-induced subacute cutaneous lupus erythematosus	Hydrochlorothiazide or terbinafine
Pseudo-porphyrria cutanea tarda	Naproxen

Most Common Type of:	Is:
Immunodeficiency disorder	Isolated IgA deficiency
Oculocutaneous albinism	Oculocutaneous albinism type 2 (tyrosinase positive albinism)
Psoriatic arthritis	Asymetric oligoarthritis or polyarthritis
Vitiligo	Generalized
Xanthoma	Xanthelasma (a type of plane xanthoma)
Biting spider in the United States	Jumping spider (phidippus)
Skin cancer in African Americans	Squamous cell carcinoma
Autoimmune bullous disease	Bullous pemphigoid
Skin disorder in patients with HIV	Folliculitis
Pityriasis rubra pilaris	Adult onset, classical (55%)
Endocrine disorder in dermatitis herpetiformis patients	Autoimmune thyroid disease (Hashimoto's thyroiditis)

Most Common Extra-cutaneous Site of:	Is:
Incontinentia pigmenti	Teeth (partial anodontia)
Systemic sclerosis	Esophageal dysfunction (90%)
Kaposi's sarcoma	Gastrointestinal tract

Most common miscellaneous:	
Cutaneous manifestation of diabetes mellitus	Diabetic dermopathy (AKA "shin spots" or pigmented pretibial papules)
Protein in the corneal envelope	Loricrin
Sign of spinal dysraphism	Localized hypertrichosis
Contact allergen in North America	Nickel

DISCLOSURES

The author has no relevant conflicts of interest to disclose.

AUTHOR CORRESPONDENCE

Mary E. Horner MD

E-mail:..... maryehorner@gmail.com