## Erythematous, Concentric Rash Resembling Wood Grain

# Placas Eritematosas Concêntricas Tipo Superfície de Madeira

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Figure 1 – Concentric skin lesions resembling a wood grain pattern, with desquamation localized to the trunk and arms

A 53-year-old man presented with a 10-month history of pruritic erythematous rash and scaling of the scalp, which spread to his trunk and limbs (Fig. 1). He had no relevant medical history nor was he on any medication. On examination, he had erythematous, concentric skin lesions resembling a wood grain pattern, with desquamation (Fig. 2). These lesions affected mainly the trunk and extremities. He also had enlarged lymph nodes in the left inguinal

## PROTECTION OF HUMANS AND ANIMALS

The authors declare that the procedures were followed according to the regulations established by the Clinical Research and Ethics Committee and to the Helsinki Declaration of the World Medical Association.

### DATA CONFIDENTIALITY

The authors declare having followed the protocols in use at their working center regarding patients' data publication.

Figure 2 – Clinical lesions localized to the trunk

region and thickening of the palmar skin. Biopsy of the skin and excisional biopsy of a lymph node were nonspecific. Malignant and infectious diseases were excluded.

Erythema *gyratum repens* is a rare, but clinically specific and representative erythema associated with malignancy.<sup>1-4</sup> It can precede, occur concurrently, or appear after a diagnosis of a neoplasm.<sup>1,3-5</sup> It is considered the most specific paraneoplastic syndrome.<sup>4</sup>

## INFORMED CONSENT

Obtained.

## CONFLICTS OF INTEREST

All authors report no conflict of interest.

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## REFERENCES

- 1. De La Torre-Lugo EM, Sánchez JL. Erythema gyratum repens. J Am Acad Dermatol. 2011;64:89–90.
- Rongioletti F, Fausti V, Parodi A. Erythema gyratum repens is not an obligate paraneoplastic disease: a systematic review of the literature and personal experience. J Eur Acad Dermatol Venereol. 2014;28:112–5.
- 3. Liau MM, Long V, Yang SS. Erythema gyratum repens: a paraneoplastic eruption. BMJ Case Rep. 2016;2016.
- 4. Eubanks LE, McBurney E, Reed R. Erythema gyratum repens. Am J Med Sci. 2001;321:302–5.
- 5. Galán-Gutiérrez M, Martínez-Peinado CM, Ruiz-Villaverde R. Erythema gyratum repens: not always a paraneoplastic disease. Rev Clin Esp. 2014;214:425–7.
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