

AUTO - ERYTHROCYTE SENSITIZATION (Case Report)

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Summary

Two cases of auto-erythrocyte sensitization, which is a rare clinical entity, are reported.

Auto-erythrocyte sensitization (Syn. Devil's pinch, Painful-bruising syndrome) which is believed to be the result of autosensitization to extravasated red blood cells, is characterised by recurrent painful erythematous and purpuric lesions on thighs and elsewhere. The disease occurs most frequently in young adult and middle aged females, who are often psychiatrically abnormal¹. Thus, it has been rightly remarked by Ratnoff and Agle² that autosensitivity to erythrocyte stroma may be a psychosomatic disorder. Generalised abdominal complaints associated with nausea, vomiting and syncopal attacks occur and gastrointestinal and intracranial bleeding have been reported³. Diagnosis of auto-erythrocyte sensitization may be confirmed by intradermal injections of red blood cells or their washed stroma¹.

Case Reports

Case 1 : A 32 year-old married woman presented with recurrent painful erythematous and bluish macules on thighs and forearms for ten years. She had been getting such lesions

spontaneously every 2-4 months and these lesions used to subside in 3-5 days. The patient also gave history of passing black coloured stools twice in the past one year. She had an introvert tense personality and had been getting occasional hysterical attacks for about two years prior to her hospital visit. She also had pruritus vulvae and neurodermatitis for ten years. On examination she had bluish echymotic lesions on both thighs, buttocks and the left forearm. Intradermal test with patient's own blood gave positive result.

Case 2 : A 21 year-old unmarried lady presented in O P D with history of recurrent erythematous and bluish macules on thighs, legs and forearms (Fig. 1) for four years which would appear spontaneously and disappear in 10-15 days. The patient started getting lesions 2 months after her father expired. She had such episodes about 4-5 times and they were often associated with depression and increased mental tension. On examination she had erythematous and bluish echymotic lesions on both thighs, right knee and right forearm. The intradermal test with patient's own blood was, however, negative.

Discussion

Auto-erythrocyte sensitization is said to be a distinctive and rare clinical

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Fig. 1. Echymotic lesions on the flexor aspect of right forearm.

entity¹. Both the cases reported belonged to the age group described, viz., young, adult and middle aged females. Both of them presented recurrent painful echymotic lesions occurring in hysterical individuals. Only one case gave history of gastrointestinal bleeding (malena) which has been reported to occur occasionally in these cases. One of the two cases also had neurodermatitis, again highlighting the fact that the disease may be basically a psychosomatic disorder. In one case the severity

of the condition was related to the degree of emotional stress. The intradermal test with patient's own red blood cells was positive only in one case.

The management of this condition is a problem because these cases are resistant to psychotherapy and no significant response is seen with corticosteroids³.

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