

HEREDITARY CAMPTODACTYLY MASQUERADING LEPROSY

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A case of hereditary camptodactyly with fixed flexion deformity is reported. The case had been misdiagnosed and treated as leprosy in the field.

Introduction

In areas endemic for leprosy, there is often some overdiagnosis. Hereditary camptodactyly, a fibrodysplastic disorder characterized by fixed flexion deformity of proximal interphalangeal joint of little fingers is one of the many conditions misdiagnosed as leprosy. We are reporting one such case.

Case Report

An 18-year-old male from a rural area had been on antileprosy treatment for one year without any relief. He presented with complaints of asymptomatic, slowly progressive increasing flexion deformity of his left little and ring fingers and right little finger for last 8 years. He had no other complaints.

On examination, there was fixed flexion deformity of the proximal interphalangeal joints of the little and ring fingers of the left hand and a similar affliction of the right little finger. The metacarpophalangeal joints were normal. No abnormality was detected in the joint of the toes. There was no other congenital abnormality.

Examination of the skeletal system revealed pectus carinatum and mild degree of scoliosis. Inspection of oral cavity revealed a high arched palate. All the teeth were normal.

Systemic examination was noncontributory.

Routine laboratory investigations were normal except X-ray of the spine which confirmed the scoliosis.

Comments

In busy dermatological out patient clinics and equally busy leprosy clinics, specially in the field in endemic areas, very little time is spent on complete history taking and thorough clinical examination.

The present case, had no neurological deficit and if care had been taken to elicit the other cardinal signs of leprosy before diagnosing him as a case of Hansen's disease, he would not have been wrongly treated. Flexion deformity of the proximal interphalangeal joint of the little finger superficially resembling an ulnar claw hand resulted in misdiagnosis.

Hereditary camptodactyly is an inherited, often bilateral, fixed flexion deformity of the proximal interphalangeal joints, usually of the little fingers.¹ Our patient was an isolated case, probably due to a mutant gene.

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This disorder may be associated with other skeletal defects like scoliosis, high arched palate and syndromes like trisomy 13, occulo-dento-digital, oro-facio-digital and cerebrohepato-venal syndromes.² However our case had only mild scoliosis and a high arched palate which had been overlooked and contributed to the misdiagnosis.

Pavithran has also reported a case of hereditary camptodactyly which had been misdiagnosed as claw hand.³

References

1. Apley A G, Solomon L. The hand. In: Apley's systems of orthopaedics and fractures, 6th edn. London: Butterworths, 1982; 188.
2. Jobe M T, Wright II P E. Congenital anomalies of hand. In: Campbell's operative orthopaedics (Crenshaw A H, ed), 8th edn. Missouri: Mosby Year Book, 1992; 3416.
3. Pavithran K. Camptodactyly simulating claw hand in a patient with indeterminate leprosy. Ind J Lepr 1991; 63: 232-4.

ANNOUNCEMENT

The IV South Indian (Zone) Conference of Dermatologists, Venereologists and Leprologists will be held at Hyderabad from 28th to 30th October, 1993.

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