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EPIDERMODYSPLASIA VERRUCIFORMIS

To the Editor,

Epidermodysplasia verruciformis is a rare condition characterised by widespread and persistent infection with human papilloma virus (HPV) types 5,8,9,12,14.¹

A 7-year-old boy presented with numerous, discrete and confluent, greyish black, pinhead sized, flat topped papules over the scalp, forehead, back of both auricles, face, neck, front and back of the trunk of 6 months duration. In addition, there were multiple, small (1-1.5cm) discrete, scaly, hypopigmented macules over front and back of the trunk, resembling pityriasis versicolor. The histological picture confirmed the clinical diagnosis of epidermodysplasia verruciformis. He was given 0.025% tretinoin cream topically twice daily and topical sunscreens. Within two months, the lesions flattened, but did not disappear entirely. Long term prognosis will require regular surveillance and follow up.

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CONTACT LEUCODERMA CAUSED BY LEMON

To the Editor,

Contact leucoderma has been reported

with bindis and footwear.^{1,2} It is caused mainly by paratertiary butyl phenol used in adhesives of bindi and footwears.³ We are reporting an unusual case of contact depigmentation due to lemon which was rubbed over the face.

A 20-year-old girl presented with patchy depigmentation which she developed after 5 days of rubbing fresh lemon over the face. After few hours of rubbing, she felt burning over the site. On second day of application she developed redness, itching and scaling. After exfoliation lesions healed within 5 days and left depigmented patches.

Contact depigmentation may be due to direct toxic effect of chemicals on melanocytes⁴ or due to development of immunological reaction (contact dermatitis) followed by depigmentation as in bindi dermatitis.⁵ In our patient the depigmentation produced by lemon was probably because of direct toxic effect over melanocytes as patch test to lemon juice was negative.

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