

Case of syphilis with alopecia and folliculitis as manifestations

Received: June, 2018

Accepted: April, 2019

Published: February 2021

DOI:

10.4103/ijdv.IJDVL_336_18

PMID:

31464198



Figure 1a: Diffuse red follicular pustules or papulopustules on the face



Figure 1b: Patches of irregular moth-eaten alopecia on the occipitotemporal scalp

A 22-year-old homosexual man presented with increasing hair loss on the bitemporal scalp and scattered red follicular papules on his face over a period of 2 months. He claimed to have no previous history of genital ulcer or other skin lesions or application of medications/home remedies; however, dermatological examination revealed diffused red follicular papulopustules scattered on his face [Figure 1a]. The occipitotemporal scalp showed multiple irregular patches of nonscarring alopecia, with characteristic moth-eaten borders [Figure 1b]. Serological screening for syphilis further showed increased titers for rapid plasma reagin test (1:64), and *Treponema pallidum* hemagglutination assay and fluorescent treponemal antibody-absorption [Figure 2a] test were positive. serology for other sexually transmitted disorders were negative. Dermoscopy revealed black dots with diffuse telangiectasia in the alopecic patches, as well as brown rings around perifollicular areas [Figure 2b]. The patient denied

How to cite this article: Lin YY, Tseng YS, Zhu W. Case of syphilis with alopecia and folliculitis as manifestations. Indian J Dermatol Venereol Leprol 2021;87:125-6.

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, tweak, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

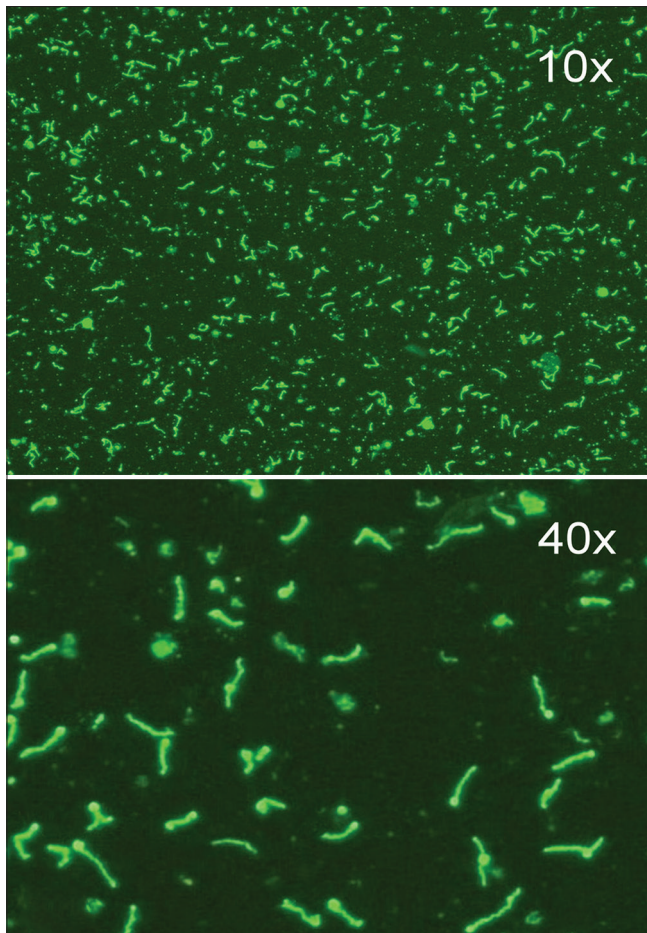


Figure 2a: Fluorescent treponemal antibody-absorption test showed positive

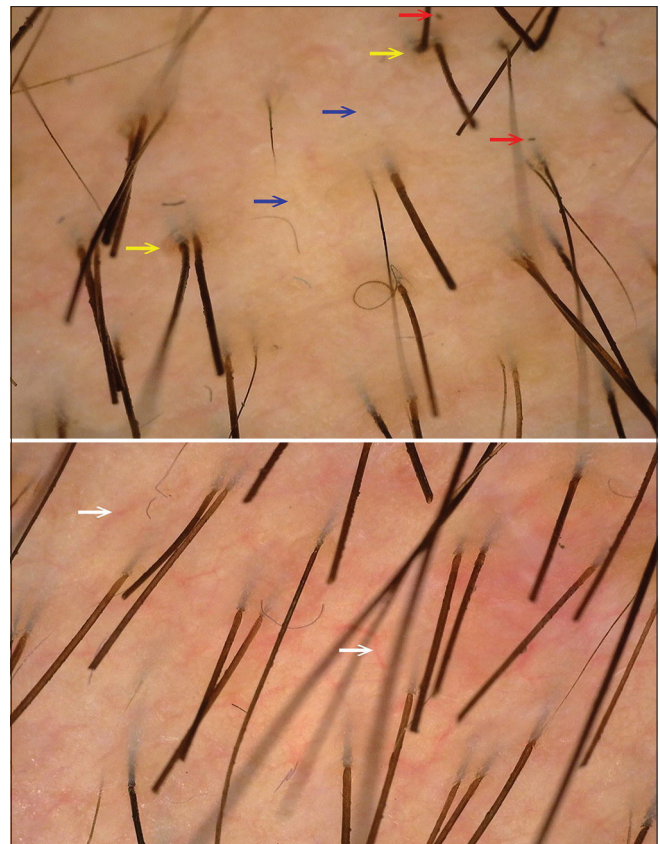


Figure 2b: Dermatoscopy examination showed small patches of hair loss (blue arrow) with black dots (red arrow), brown rings around perifollicular areas (yellow arrow), and diffused telangiectasia (white arrow) (Dermoscopy-II, Dermat, China; polarized light mode, $\times 200$)

biopsy on request. Alopecia is a rare clinical manifestation of secondary syphilis; however, with folliculitis it has seldom been mentioned in the literature.

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent forms. In the form, the patient has given his consent for his images and other clinical information to be reported in the journal. The patient understands that name and initials will not be published and due efforts will be made to conceal identity, but anonymity cannot be guaranteed.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

Yu-Ying Lin, Yun-Shan Tseng¹, Wei Zhu

Department of Dermatology, Xuanwu Hospital, Capital Medical University, Beijing, China, ¹Department of Nursing, I-Shou University, Kaohsiung, Taiwan

Corresponding author:

Dr. Wei Zhu,
Department of Dermatology, Xuanwu Hospital,
Capital Medical University, Beijing 100053, China.
zhuwei@xwh.cmu.edu.cn