

Cutaneous cholesterol embolization syndrome

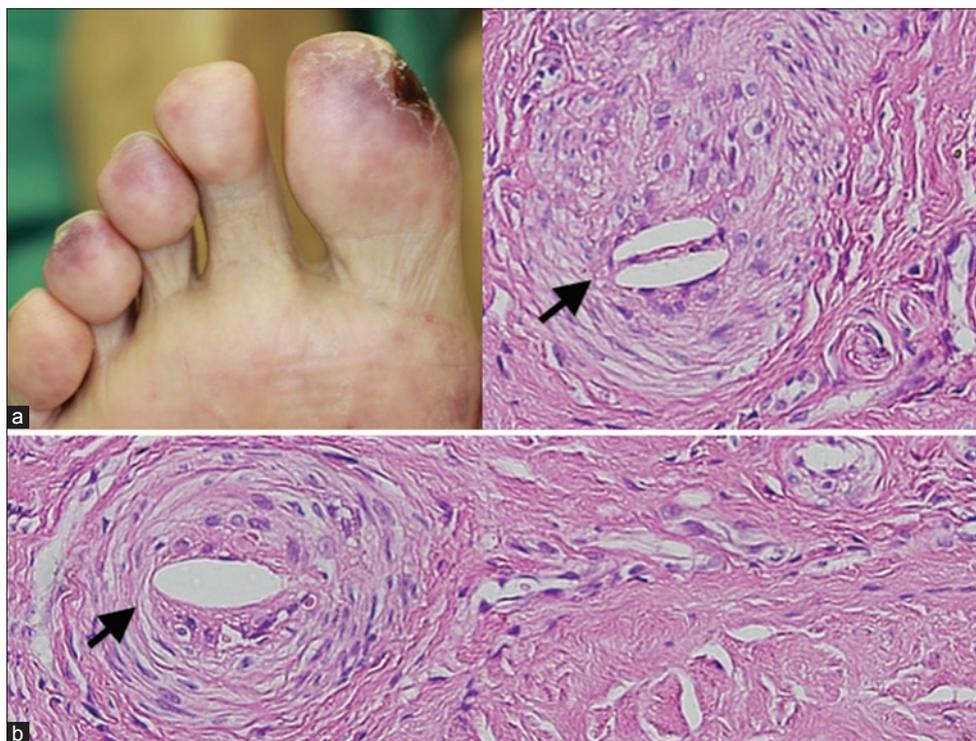


Figure 1: (a) Bluish reticulated patches were observed on the tips of the patient's toes and an ulcer was noted on his right toe; (b) skin biopsy showed the presence of cholesterol clefts in the lumen of a vessel

A 67-year-old man with type 2 diabetes mellitus underwent percutaneous coronary intervention. Six weeks later, bluish reticulated patches were observed on the tips of his toes and an ulcer was noted on his right toe [Figure 1a]. Laboratory tests showed eosinophilia, an elevated serum creatinine level and an elevated lactate dehydrogenase level. Skin biopsy showed the presence of cholesterol clefts in the lumen of a vessel [Figure 1b]. His kidney function continued to deteriorate and reached end-stage renal disease in 3 months. Cholesterol embolization syndrome is caused by embolization of cholesterol crystals and is commonly associated with iatrogenic manipulations. Skin biopsy is diagnostic and the needle-shaped spaces noted within the lumen of arterioles of the affected skin are characteristic.

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Access this article online

Quick Response Code:



Website:

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DOI:

10.4103/0378-6323.158664

How to cite this article: Imai N, Zamami R, Kimura K. Cutaneous cholesterol embolization syndrome. Indian J Dermatol Venereol Leprol 2015;81:388.

Received: September, 2014. **Accepted:** September, 2014. **Source of Support:** Nil. **Conflict of Interest:** None declared.