### CASE NOTE

# KERATOSIS PALMARIS et PLANTARIS (TYLOSIS) WITH CARCINOMA OESOPHAGUS

A Case Report

By

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Keratosis palmaris et plantaris (Tylosis) is a hereditary condition characterized by symmetrical thickening of the stratum corneum of the palms and soles. Howell-Evans et al (1958) reported a few cases of tylosis associated with carcinoma of the oesophagus. Hence a single case of tylosis associated with cancer oesophagus is being reported.

## CASE REPORT

M. P., a 70 year-old man was admitted to Kasturba General Hospital, Manipal, on 1st October, 1962 with a history of dysphagia, occasional bouts of haematemesis and loss of weight for the past 3 months.

On admission the patient was pale, poorly nourished and emaciated. Pulse, Respiration, Temperature and B. P. were within normal limits. No lymph nodes



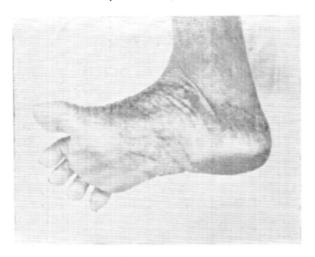
Fig. 1 Keratosis of the palms.

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were palpable. The palms and soles, and the lateral aspects of the hands and feet were rough and diffusely thickened with patchy dyschromic changes and a few painful fissures (Figs. 1, 2) This hyperkeratosis of the palms and soles was present from his childhood. But the pigmentary changes developed during the past 20 years. Throat was normal. Physical examination of other systems did not reveal any other abnormality. Family history was non-contributory.

Blood studies showed a total red-cellcount of 3.2 milion per c. mm, Hb. 10 G per cent, white-cell count 9,500 per c. mm. with a differential count of Neutrophils



Flg. 2 Keratosis of Sole.

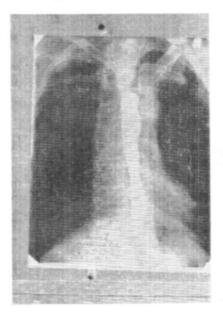


Fig. 3 Carcinoam lower part of oesophagus.

72 per cent, Eosinophils 6 per cent, Lymplocytes 18 per cent and Monocytes 4 per cent. Stool was positive for occult blood. Urine showed traces of albumen, pus cells 8 to 10 per H. P. F. and Granuler casts 1 to 2 per H. P. F. Barium swallow and screening revealed irregularity and narrowing of the lumen of the lower third of the oesophagus. Oesophagoscopy revealed an irregular growth in this region. suggesting a malignant tumour. (Fig. 3) Biopsy could not be done as the patient did not agree to it.

DISCUSSION

Keratosis palmaris et plantaris inherited as a simple dominant characteristic. It may be evident at birth or its appearance may be delayed for a few years. Usually it is diffuse on the palms and soles but may have a punctate or patchy distribution. Sometimes the skin over the dorsal aspect of the fingers and hand may also be thickened. The thickening may be minimal or very marked with painful fissures causing difficulty in manual movements and walking.

The condition is not rare but the recorded cases are few probably because of the trivial nature of the disease. Swan (1936) reported an incidence of 1 in 40 000 in Northern Ireland. It may be associated with other congenital and hereditary anomalies of the skin. Hanhart mentioned its association with multiple lipomatosis. Brain et al (1947) have mentioned the development of epitheliomatous changes in the tylotic skin. In the past epitheliomatous changes were not uncommon in the arsenical keratoses of the palms and soles. Recently in 1958 Howell Evans et al reported 18 cases of tylosis in two families in which 17 were associated with carcinoma of the oesopnagus. It is difficult to explain such an association but it is more than an incidental finding. It is explained by the possible mutation of a normal tylotic gene. Chatterjee (1962) reported a case of tylosis with bilateral nerve deafness.

In this case, the patient had moderate degree of hyperkeratosis of palms and soles since his childhood and developed carcinoma of the lower end of the oesophagus at the age of 70 years.

However trivial the disease may seem, all cases of tylosis specially in the cancer age group, should be thoroughly investigated for evidence of associated carcinoma of the oesophagus. If all the cases of tylosis are followed up it may be possible to detect the development of leukoplakic change in the mucous membrane of the oesophagus (anologous to keratoses on the skin) in the earlier stages.

#### SUMMARY

A case of Keratosis palmaris et plantaris associated with carcinoma oesophagus in a 70 year old man is reported. ~

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