

A Case Of Diffuse Dermatomyositis As Seen In An X-Ray

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Abstract

Case Report: A 18 year old female patient presented with swelling and erythema of upper and lower eye lids, scaling of scalp and follicular and non follicular erythematous papules on limbs. The complaints started 6 months ago as itching and scaling of scalp. After 2 months, she developed erythematous papular lesions of the body and erythema and oedema of eyelids. Simultaneously she developed extreme weakness and difficulty in swallowing.

The patient was sick, pyrexial and there was erythema (heliotrope) and oedema of eye lids. There were grouped erythematous papular lesions on the extremities. In addition there was dystrophy of cuticle of finger nails and scaling of scalp.

The patient was unable to get up, nor could she raise her hands to comb hair. Musculature of shoulder girdle and hip was tender. She could not breathe properly and swallowing was difficult.

Her total leucocyte count was $5000/\text{mm}^3$ and ESR 68 mm first h. Her C.P.K. was 981 units per 1L and serum creatinine was 0.67 mg%. SGOT was 147 units per 1L and SGPT was 66 units per 1L. L.E cell phenomenon was negative, Muscle biopsy showed changes of myositis. Chest X-ray was done and shows diffuse calcifications.

She was finally diagnosed with diffuse dermatomyositis as seen in the X-ray.

Figure 1



References

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