ORIGINAL RESEARCH PAPER

Orthopaedics

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CASE REPORT: CALCINOSIS CUTIS

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Introduction: An 11 year old boy presented in the out-patient department with the chief complaints of swelling over his Right forearm and inability to completely supinate the forearm since 2 years. Additionally, he complained of blisters over his back which falls of without itching. He had no history of fever with chills/rigor, blurring of vision, fits - convulsions or any other neurosensory deficit. Examination: Patient is able to flex and extend his elbow and wrist completely but there is restricted supination and pronation with 30 degrees range of movement in either direction. Multiple nodules can be felt over the forearm and wrist which are tender on palpation. Nodules are hard, slightly mobile with movement of the wrist and forearm. Hard white blisters present on the extensor areas of arm and back. Approach: Radiologically, on X-ray multiple calcified circular lesions (target sign) present in multiple planes in different sizes in between the ulna and radius. There is bowing of the forearm bones with disrupted inferior radio-ulna joint. On MRI, calcified lesions are confirmed lying within the subcutaneous planes, muscular compartments and also involving the intramuscular septum. Blood reports showed eosinophilia(7.45%) with Erythrocyte Sedimentation Rate 18mm/hr and C-Reactive Proteins lmg/dl. On HPE, section study showed fibro-collagenous tissue showing marked areas of calcification with surrounding dense fibrosis suggestive of Calcinosis Cutis. Discussion: Initially, patient was managed for skeletal cysticercosis with albendazole but with negative ELISA and normal CT head, en-masse dissection of one lesion from dorsum of wrist was done under fluoroscopy and sent for Histo-pathological Examination. Calcinosis cutis is a rare condition which we discovered in this patient.

