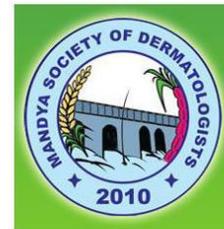




InfoDerma



A NEWS BULLETIN FROM DEPARTMENT OF DERMATOLOGY
ADICHUNCHANAGIRI INSTITUTE OF MEDICAL SCIENCES

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ANTI LEPROSY DAY

On the Eve of National Anti Leprosy day and Martyrs' day (Sarvodaya day) on 30th January 2016, we from the Department of Dermatology conducted a "Free skin camp and Leprosy Screening" at the Government General Hospital, Nagamangala between 9am to 4pm.

The inaugural function was attended by the Administrative Medical officer of Government General Hospital, Nagamangala Dr. Jyothi Lakshmi, Taluk Health officer Dr. Dhananjaya, Medical Superintendent of Adichunchanagiri Hospital & Research Center Dr. T.M.Manohar. Department of Dermatology was represented by Dr. M.Ranga Swaroop, Associate Professor; other faculty members and post graduates.



Dr. T.M.Manohar and Dr. Dhananjaya addressed the gathering and highlighted the importance of early detection and prompt treatment of leprosy. They also stressed on the importance of eliminating the social stigma associated with the disease. A two minute silence was observed from 11am to 11:02am to pay our respect towards Mahatma Gandhiji on his death anniversary.

A total of 100 patients from Nagamangala Taluk and surrounding villages attended the camp. All the patients were attended to by our Doctors and free drug samples were distributed to them. Patients were advised for follow up at our hospital.

**PRAJAVANI AND KANNADA PRABHA NEWSPAPERS
REPORTED THE ANTI LEPROSY DAY CELEBRATION**

ಉಚಿತ ಕುಷ್ಠ ರೋಗ ತಪಾಸಣಾ ಶಿಬಿರ



ಎಲ್ಲರೂ ಕೈಜೋಡಿಸಬೇಕು. ಸರ್ಕಾರಗಳು ಕೂಡ ಕುಷ್ಠರೋಗ ನಿವಾರಣೆಗೆ ಹಲವು ಯೋಜನೆಗಳನ್ನು ಜಾರಿಗೆ ತಂದಿವೆ. ಇದರ ಉಪಯೋಗ ಪಡೆದುಕೊಳ್ಳಬೇಕೆಂದು ಮನವಿ ಮಾಡಿದ ಅವರು, ಕುಷ್ಠ ರೋಗದ ಗುಣಲಕ್ಷಣಗಳ ಕುರಿತು ಮಾಹಿತಿ ನೀಡಿದರು.

ತಾಲ್ಲೂಕು ವೈದ್ಯಾಧಿಕಾರಿ ಡಾ.ಧನಂಜಯ ವಾತನಾಡಿ, ತಾಲ್ಲೂಕಿನ ಗ್ರಾಮಗಳಿಗೆ ಆರೋಗ್ಯ ಕಾರ್ಯಕರ್ತೆಯರು ಭೇಟಿ ನೀಡಿ ಕುಷ್ಠ ರೋಗದ ಬಗ್ಗೆ ಮಾಹಿತಿ ನೀಡುತ್ತಿದ್ದಾರೆ. ಕಳೆದ ಒಂದು ವರ್ಷದ ಅವಧಿಯಲ್ಲಿ ತಾಲ್ಲೂಕಿನಲ್ಲಿ ಯಾವುದೇ ವ್ಯಕ್ತಿಗೆ ಕುಷ್ಠ ರೋಗ ಕಂಡು ಬಂದಿಲ್ಲ ಎಂದರು.

ಕಾರ್ಯಕ್ರಮಕ್ಕೂ ಮುನ್ನ ಗಾಂಧೀಜಿಯವರ ಮಣಿಸ್ಮರಣೆ ನಿಮಿತ್ತ ಎಲ್ಲರೂ ಎರಡು ನಿಮಿಷ ಮೌನ ಆಚರಿಸಿ ನಮನ ಸಲ್ಲಿಸಿದರು. ತಾಲ್ಲೂಕು ಸಾರ್ವಜನಿಕ ಆಸ್ಪತ್ರೆ ವೈದ್ಯಾಧಿಕಾರಿ ಡಾ.ಜ್ಯೋತಿಲಕ್ಷ್ಮಿ, ಆದಿಚುಂಚನಗಿರಿ ಆಸ್ಪತ್ರೆಯ ಚರ್ಮರೋಗ ವಿಭಾಗದ ಮುಖ್ಯಸ್ಥ ಡಾ.ಸ್ವರೂಪ್, ಡಾ.ವಿನಾಯಕ್, ಡಾ.ಪ್ರಕಾಶ್ ಇತರರಿದ್ದರು.

ನಾಗಮಂಗಲ ತಾಲ್ಲೂಕು ಸಾರ್ವಜನಿಕ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ನಡೆದ ಉಚಿತ ಕುಷ್ಠರೋಗ ತಪಾಸಣಾ ಶಿಬಿರ ಮತ್ತು ಹುತಾತ್ಮರ ದಿನ ಕಾರ್ಯಕ್ರಮವನ್ನು ಆದಿಚುಂಚನಗಿರಿ ವೈದ್ಯಕೀಯ ಆಸ್ಪತ್ರೆ ಮತ್ತು ಸಂಶೋಧನ ಕೇಂದ್ರದ ವೈದ್ಯಕೀಯ ಅಧೀಕ್ಷಕ ಡಾ.ಬಿ.ಎಂ.ಮನೋಹರ್ ಉದ್ಘಾಟಿಸಿದರು.

ನಾಗಮಂಗಲ,ಬಿ.ಸಿ.ಒ-ಪಟ್ಟಣದ ಸಾರ್ವಜನಿಕ ಆಸ್ಪತ್ರೆಯಲ್ಲಿ ಆದಿಚುಂಚನಗಿರಿ ವೈದ್ಯಕೀಯ ಆಸ್ಪತ್ರೆ ಮತ್ತು ಸಂಶೋಧನ ಕೇಂದ್ರದ ಸಹಯೋಗದೊಂದಿಗೆ ಉಚಿತ ಕುಷ್ಠರೋಗ ತಪಾಸಣಾ ಶಿಬಿರ ಮತ್ತು ಹುತಾತ್ಮರ ದಿನ ಕಾರ್ಯಕ್ರಮ ನಡೆಯಿತು.

ಕಾರ್ಯಕ್ರಮವನ್ನು ಉದ್ಘಾಟಿಸಿ ಮಾತನಾಡಿದ ಡಾ.ಬಿ.ಎಂ.ಮನೋಹರ್, ಕುಷ್ಠರೋಗ ಪೀಡಿತರನ್ನು ಸಮಾಜದ ಮುಖ್ಯವಾಹಿನಿಗೆ ತಂದು ಅವರಲ್ಲಿ ಆತ್ಮವಿಶ್ವಾಸ ಮೂಡಿಸಲು

JNANA VIGNANA TANTRAJNANA MELA 2016

Our Department participated in the Jnana Vignana Tantrajnana mela 2016 held at Adichunchanagiri Mutt on 18th, 19th and 20th February 2016. The themes for this year were:

1. Leprosy is curable.
2. LASERS and light based treatments available in the Department of Dermatology.

Since Leprosy is prevalent even today and as there is still a lot of stigma attached to it, we educated the public regarding the myths and misconceptions about leprosy. We also educated them about the importance of early diagnosis and treatment so that long term deformities and disabilities can be prevented.

LASERS and light-based treatments are widely practiced in our Department owing to the cosmetic conscious public even in the rural area. Hence we wanted to bring to the notice of the public the various cosmetic treatments available in our Department.

Solitary stony hard plaque over the scalp in a young adult: A case report

Introduction:

Osteoma cutis (OC) is a rare and benign disease characterized by the formation of bone tissue in dermis and subcutaneous tissue. It presents in children and adults with a female preponderance. It is classified as primary OC (15%) wherein bone tissue formation occurs in skin without any pre-existing lesions or is associated with syndromes such as Albright's hereditary osteodystrophy (AHO) and secondary OC (85%) wherein osseous tissue formation occurs in preexisting lesions. Till date, very few cases of isolated plate-like OC have been reported worldwide. We are describing a case of adult-onset plate-like OC over the scalp of 4 years' duration.

Case report:

A 28-year-old man presented with a slowly growing, asymptomatic, raised lesion over the scalp for the past 4 years. There was no history of itching, pain or bleeding at the site of the lesion. He had no history of trauma or previous lesions on the scalp. Family history was non contributory. He did not have any features suggestive of AHO. On clinical examination, a solitary, well-defined, stony hard plaque of size 2 cm × 1 cm, was present over the vertex of the scalp [Figure 1].



Figure 1

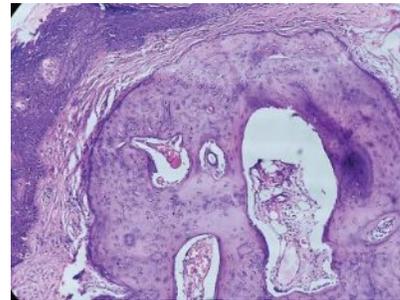


Figure 2

Complete blood count (CBC), serum calcium and phosphorus, serum electrolytes, and liver and renal function tests were normal. Punch biopsy from the lesion revealed a focus of ossification in the dermis [Figure 2]. The ossified focus showed hollow areas containing capillaries, ground substance, collagen, and fibroblasts. There was a foreign body granuloma around the ossified focus, composed of foreign body giant cells, epithelioid cells, histiocytes, neutrophils, and lymphocytes. The adjoining epidermis showed hypergranulosis and basket weave orthohyperkeratosis. Based on history, clinical examination, and histopathological findings, adult-onset plate-like OC was diagnosed.

Discussion:

Osteoma cutis (OC) is a rare and benign disease, characterized by the formation of mature lamellar bone within the dermis and subcutaneous tissue. It is classified into primary and secondary forms. Primary OC may occur *de novo* or in association with syndromes like AHO, fibrodysplasia ossificans progressiva or progressive osseous heteroplasia. Secondary OC is the most common variant (85%), wherein the ossification process occurs in pre-existing inflammatory or neoplastic skin lesions such as acne vulgaris, pilomatrixoma, trauma, venous stasis, syringoma, epidermoid cysts, scleroderma, scars, and basal cell carcinoma. The pathogenesis of primary OC is not known. Burgdorf and Nasemann proposed two theories. The first theory suggested anomalous migration of osteoblasts to the skin, whereas the second theory stated metaplasia of fibroblast to osteoblast in the dermis due to mutation in the gene *GNAS1*, which encodes for a protein known to regulate adenyl cyclase activity. OC presents in adults and children with a greater female preponderance. Clinically, primary OC manifests in four patterns: a. Solitary osteoma; b. Widespread OC; c. Multiple miliary osteomas of the face and d. Congenital plate-like osteoma in neonates and infants.

Primary OC may also be associated with syndromes such as, AHO, which is characterized clinically by short stature, round facies, brachydactyly, developmental delay, café au lait macules, and fibrous dysplasia of long bones. It is also associated with hypocalcemia, hyperphosphatemia, and elevated serum parathyroid hormone levels, which in our case was excluded by physical and laboratory evaluation. Since that time, there have been other reports of plate-like OC that do not present in the first few years of life. Till date, less than 15 cases of acquired, idiopathic, plate- or plaque-like primary OC have been reported, the most common location being the head and scalp in men.

Our patient presented with a solitary asymptomatic plaque on the scalp of 4 years' duration with no secondary findings both clinically and histopathologically. Hence we arrived at the diagnosis of acquired, adult-onset plate-like OC. Surgical excision is the treatment of choice for plate-like OC. Other modalities of treatment are erbium:YAG laser, dermabrasion, and topical application of retinoids. We report this case for its rarity.

DEPARTMENT NEWS

- Our Department faculty has published the following scientific papers in indexed journals:
 1. Dr. B D Sathyanarayana, Professor & Head published an original article titled, 'A clinicoepidemiological study of premature canities of degree college students in the rural area'
 2. Dr. M R Swaroop, Associate Professor published an original article titled, 'Evaluation of efficacy and safety of modified technique of auto-wart implantation in the treatment of multiple, recurrent and recalcitrant warts'
 3. Dr. Yogesh D, Assistant Professor published a case report titled, 'Phenytoin induced drug rash with eosinophilia and systemic symptoms syndrome.'
- Our postgraduate students presented the following clinical e-posters in the 44th National Conference of Indian Association of Dermatologists, Venereologists & Leprologists (IADVL) - **DERMACON 2016** held at Coimbatore between 21st and 24th January 2016.
 1. A comparative study of efficacy and safety of modified technique of autowart implantation therapy and autowart injection therapy in the treatment of multiple, recurrent and recalcitrant warts – presented by Dr P Vasudevan
 2. To evaluate the efficacy of autologous serum therapy in chronic urticaria – presented by Dr Ankita Gupta
- **Ongoing research projects:**
 1. To study the correlation of clinical, dermoscopic and histopathological features of clinically suspected macular amyloidosis – by Dr Monica Dukkupati, Dr B D Sathyanarayana
 2. The association of metabolic syndrome and insulin resistance in early onset androgenetic alopecia in males: A case-control study– by Dr Manohara BK, Dr M R Swaroop
 3. Clinicoepidemiological study of adult acne in a rural tertiary care hospital: A cross sectional study – by Dr Aneesa, Dr B D Sathyanarayana
 4. Evaluation of efficacy and safety of intense pulsed light (IPL) therapy in the treatment of facial acne vulgaris - by Dr Priyanka, Dr M R Swaroop
- We cordially invite the new postgraduates Dr. Shruti, Dr. Sindhuja and Dr. Suman to our Department.