

Hyperpigmented pityriasis versicolor misdiagnosed as acanthosis nigricans

A 15-year-old girl presented with a 3-month history of non-pruritic hyperpigmented macules on her back (figure 1). Her history included severe obesity and hyperinsulinism. The lesions were previously diagnosed as acanthosis nigricans.

Physical examination showed well-demarcated, coalescing and finely scaling macules on the back. Examination with a Wood lamp revealed a yellow-green fluorescence. A diagnosis of pityriasis versicolor (PV) was made. Oral treatment with 2 weeks of fluconazole was started, with resolution of the lesion.

PV is a skin infection caused by *Malassezia*, a saprophytic and lipophilic fungus. PV is typically found among teenagers when there is an increase in sebum production. The lesions occur on the upper trunk, arms and neck and rarely involve the skin folds, in contrast to acanthosis nigricans.^{1,2}



Figure 1 Well-demarcated, coalescing, hyperpigmented macules on the patient's back.

As the name suggests, PV lesions may appear in a range of colours, from hypopigmented to erythematous or hyperpigmented finely scaling macules. In dark-skinned individuals, hyperpigmented PV is usually dark brown, whereas light-brown lesions are typical of light-skinned patients. PV is asymptomatic, but sometimes patients may complain of mild pruritus.^{1,3}

The diagnosis of PV is mainly clinical. The 'Evoked Scale Sign', consisting of eliciting the scale layer after stretching or scratching the lesions, is helpful in confirming the diagnosis when skin scales are difficult to see.⁴ Wood lamp examination may show a yellow-green or copper-orange fluorescence. In dubious cases, microscopic examination of a potassium hydroxide scales preparation will demonstrate the simultaneous presence of yeast cells and hyphae clusters.^{1,3}

Topical antifungal agents (ketoconazole or selenium sulfide) for 1–4 weeks in the form of creams or shampoos are first-line treatments. Oral imidazoles (fluconazole or itraconazole) for 1–2 weeks are used when topical treatments failed or in case of widespread lesions.^{1,3}

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Contributors BB and MM wrote the first draft of this work and no funding was received to write it. BB and MM drafted the manuscript and approved the final manuscript as submitted. BB, EB, IB and MM contributed to achieving the clinical diagnosis of the case.

Funding The authors have not declared a specific grant for this research from any funding agency in the public, commercial or not-for-profit sectors.

Competing interests None declared.

Patient consent for publication Obtained.

Provenance and peer review Not commissioned; internally peer reviewed.

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