

Ochre dermatitis.

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Accepted on July 31, 2017

Clinical Image

A 82-year-old man with no history of skin pigmentation disorders, minocycline intake or lipodermatosclerosis was referred to our vascular clinic with a progressive dark coloration of both legs since 10 months. The patient was further asymptomatic regarding his legs. Clinical examination revealed no evidence for extensive varicosities or ulcerations.

Investigation with Duplex Ultrasound showed a superficial insufficiency of the vein valves in both legs. A blood analysis indicated normal iron and ferritin levels. The diagnosis of ochre dermatitis was made. Because the patient had no complaints, the need for lifestyle changes (avoiding standing or sitting for long periods, physical activities, elevation of the lower limbs, etc.) was explained and compression stockings were prescribed to prevent further worsening (Figure 1).



Figure 1. Dark coloration of both legs

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