Acquired Cutis Laxa - A Case Report

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ABSTRACT
Acquired cutis laxa is an uncommon disorder of connective tissue. Very few cases have been reported in literatures. The case which is described here is of a 20 year old female who developed cutis laxa following episodes of urticaria. Acquired cutis laxa is a rare disease characterized by lax skin that recoils only slowly after stretching and marked reduction in dermal elastic tissue.

KEY WORDS: Cutis Laxa, Acquired cutis laxa, anetoderma

INTRODUCTION
Cutis laxa is a rare connective tissue disorder, which may be inherited or acquired. Acquired form is rarer than inherited. It is characterized by redundant, sagging and inelastic skin. The acquired form is associated with some form of preceding or accompanying cutaneous eruptions like eczema, urticaria, erythema multiforme, or multiple myeloma. It often starts on the face and progresses caudally. The primary change is in the elastic fiber, which is decreased or nearly absent in the dermis. The precise incidence of the disease is unknown. There are very few literatures available for acquired cutis laxa.

CASE REPORT
A 20 years lady from non consanguinous family presented with complaints of generalized wheals with angioedema for 3 years and loose skin over face and axilla for last 2 years. The laxity of skin progressed from forehead to caudally. There was no preceding history of marked weight loss or severe edema. There was no documented systemic illness, family history or preceding drug intake. She was on oral antihistaminics since last 1 year. Systemic examination was normal. She appeared much older than her age. Skin over neck was diffusely wrinkled and hanging in fold. Similar wrinkling was present over forehead, cheeks (Figure 1) and axilla (Figure 2). Skin when stretched and released returned back slowly to former position. Blepharochalasis was present. There was no evidence of hyperextensibility of joints. Her complete blood count, blood glucose, liver function test, kidney function test, urine analysis, antinuclear antibody and chest X-Ray was normal. Histopathological examination on Verhoeff-Van Gieson stain showed markedly reduced elastic fibres in the dermis (Figure 3).

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Figure 1
DISCUSSION

Cutis laxa is a rare disorder of elastic tissue characterized clinically by lax, pendulous skin and histologically by loss of elastic tissue in dermis. Acquired cutis laxa usually begins in adulthood with insidious development of loose skin often starting at face and neck. It may follow episodes of urticaria, inflammatory dermatoses, Sweet’s syndrome or multiple myeloma. The pathogenesis is unknown. Several proposed hypothesis are - excessive elastase activity, dysfunction of elastase inhibitors, abnormal copper metabolism, and immune mediated mechanisms. The diagnosis is clinical, confirmed by histopathological examination. Treatment of predisposing inflammatory skin condition halts the disease progression. Plastic surgical repair improves cosmetic appearance of the patient.

CONCLUSION

Acquired cutis laxa is a very uncommon disorder of connective tissue. It is very rarely reported in literatures. In this context, we have reported this case of acquired cutis laxa.

REFERENCES