



# A boy with chronic skin lesions

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## Introduction

A 13-year-old boy presented to the primary care clinic with asymptomatic, spreader hyperpigmented macules in the anterior and posterior trunk and cervical region that had first appeared 6 months earlier and is spreading. He had systemic azole antifungals treatment 4 months previously this presentation for the suspicious of tinea versicolor, with no changes of the lesions. His medical history included no hospitalization or remarkable diseases during childhood. He was taking no medications. A physical examination performed by teleradiologic consulting of an experienced dermatologist showed brown plaques, cross-linked and confluent, in the anterior and posterior trunk and cervical region. A potassium hydroxide (KOH) preparation was performed excluding fungal elements. The cutaneous findings



were consistent with confluent and reticulated papillomatosis of Gougerot and Carteaud, a disorder of controversial etiology which causes keratinization and leads forward a hyperproliferative state. The patient was treated with azithromycin for three weeks, and a clearance of the skin lesions occurred within 1 month after the start of treatment.

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