

Visual Treats in Dermatology

A linear atrophic and hyperpigmented plaque on the face

Arunachalam Narayanan¹, Anubhab Bhattacharyya¹

¹Department of Dermatology and STD, Jawaharlal Institute of Postgraduate Medical Education and Research, Puducherry, India.



***Corresponding author:**

Arunachalam Narayanan,
Department of Dermatology
and STD, Jawaharlal Institute
of Postgraduate Medical
Education and Research,
Puducherry, India.

narayanan359@gmail.com

Received : 02 October 2022
Accepted : 26 October 2022
Published : 02 November 2022

DOI
10.25259/CSDM_113_2022

Quick Response Code:



A 45-year-old female patient presented to us with a linear, well-defined, hyperpigmented atrophic, and depressed plaque on the right paramedian forehead extending from the frontal hairline to the nasion of the nose [Figure 1] since early childhood. The lesion extended 2 cm into the frontal scalp with overlying scarring alopecia. There was no pruritus or lilac border present. She did not have any history of seizures, headache, or ocular complaints. Based on the clinical findings, we made a diagnosis of en coup de sabre morphea. It presents like the “cut of a sabre.” Baseline MRI brain and ophthalmological examination are recommended in such patients. Active morphea can be treated using methotrexate, mycophenolate mofetil, and corticosteroids. Treatment options for burnt out/inactive lesions include autologous fat transfer and filler injection with hyaluronic acid or polymethylmethacrylate.^[1]



Figure 1: A linear, well-defined, hyperpigmented, atrophic, and depressed plaque on the right paramedian forehead extending from the frontal hairline to the nasion of the nose.

This is an open-access article distributed under the terms of the Creative Commons Attribution-Non Commercial-Share Alike 4.0 License, which allows others to remix, transform, and build upon the work non-commercially, as long as the author is credited and the new creations are licensed under the identical terms.

©2022 Published by Scientific Scholar on behalf of CosmoDerma

Declaration of patient consent

Patient's consent not required as patient's identity is not disclosed or compromised.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

REFERENCE

1. Ulc E, Rudnicka L, Waśkiel-Burnat A, Warszawik-Hendzel O, Niemczyk A, Olszewska M. Therapeutic and reconstructive management options in scleroderma (Morphea) en coup de sabre in children and adults. A systematic literature review. *J Clin Med* 2021;10:4517.

How to cite this article: Narayanan A, Bhattacharyya A. A linear atrophic and hyperpigmented plaque on the face. *CosmoDerma* 2022;2:103.