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Lymphangioma circumscriptum under the dermatoscope

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Received : 11 July 2022 Accepted : 27 July 2022 Published: 05 August 2022

DOI 10.25259/CSDM_67_2022

Quick Response Code:



A 6-year-old girl presented with multiple, asymptomatic, fluid-filled lesions, on the right arm since early childhood. Examination revealed multiple, discrete, 0.2-0.3 mm, clear fluid-filled, and hemorrhagic vesicles, present in clusters, over right cubital fossa [Figure 1a]. Dermatoscopy showed multiple white, red, and blue, round to oval lacunae; separated by white lines [Figure 1b]. Some of the lacunae showed color transition; red at the bottom and white at the top [Figure 1c]. Based on history, examination, and dermatoscopy, a diagnosis of lymphangioma circumscriptum was made.

Lymphangioma circumscriptum is a congenital microcystic lymphatic malformation. The white lacunae on dermatoscopy represent lymphatic fluid whereas the red lacunae represent the presence of red blood cells in the dilated lymphatic channels. The blue lacunae represent



Figure 1: (a) Multiple, discrete, clear fluid-filled, and hemorrhagic vesicles of lymphangioma circumscriptum present over right cubital fossa. (b) Dermatoscopy showing white lacunae (white arrow), red lacunae (red arrow), and blue lacunae (blue arrow), separated by white lines or septae (yellow arrow) (DermLite DL3N, polarized, dry, contact dermatoscopy, ×10). (c) Dermatoscopy showing hypopyon sign (DermLite DL3N, polarized, dry, contact dermatoscopy, ×10).

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thrombosis within the lacuna. The color transition in lacunae, called as the two-tone lacunae or the half-and-half lacunae or the hypopyon sign, is due to the sedimentation of blood in the dilated lymphatic channels.^[1]

Declaration of patient consent

The authors certify that they have obtained all appropriate patient consent.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.

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How to cite this article: Srivastava P, Khunger N. Lymphangioma circumscriptum under the dermatoscope. CosmoDerma 2022;2:63.