



Can you identify this condition?

Yousef Binamer MD FRCPC DABD

A 52-year-old man presents to the clinic with a 3-day history of an asymptomatic rash limited to his legs. He has no history of preceding infection. In addition to the simvastatin, metformin, and amlodipine he has been taking, he started taking hydrochlorothiazide 3 weeks before this eruption. A physical examination reveals nonblanching, palpable purpura on his legs only.

The most likely diagnosis is

1. Drug-induced leukocytoclastic vasculitis
2. Stasis dermatitis
3. Contact dermatitis
4. Pigmented purpuric dermatosis

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Can you identify this condition?

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A healthy 22-year-old man of African-Canadian descent presents with a 2-year history of painful, keratotic, firm lesions located in the creases of the palm and distal fingers. The smaller, newer lesions on the fingers are smooth and translucent. The larger, more developed palm lesion contains a keratin-pluglike centre. These lesions are distinct from the callosities of the distal palm.

The most likely diagnosis is

1. Verruca vulgaris
2. Punctate palmoplantar keratoderma
3. Porokeratosis
4. Palmar psoriasis

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