

# **TITLE: UNVEILING THE PAPULAR PUZZLE: A CASE OF ANGIOKERATOMA OVER THE LOWER LIMB IN A YOUNG MALE**

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## **Introduction**

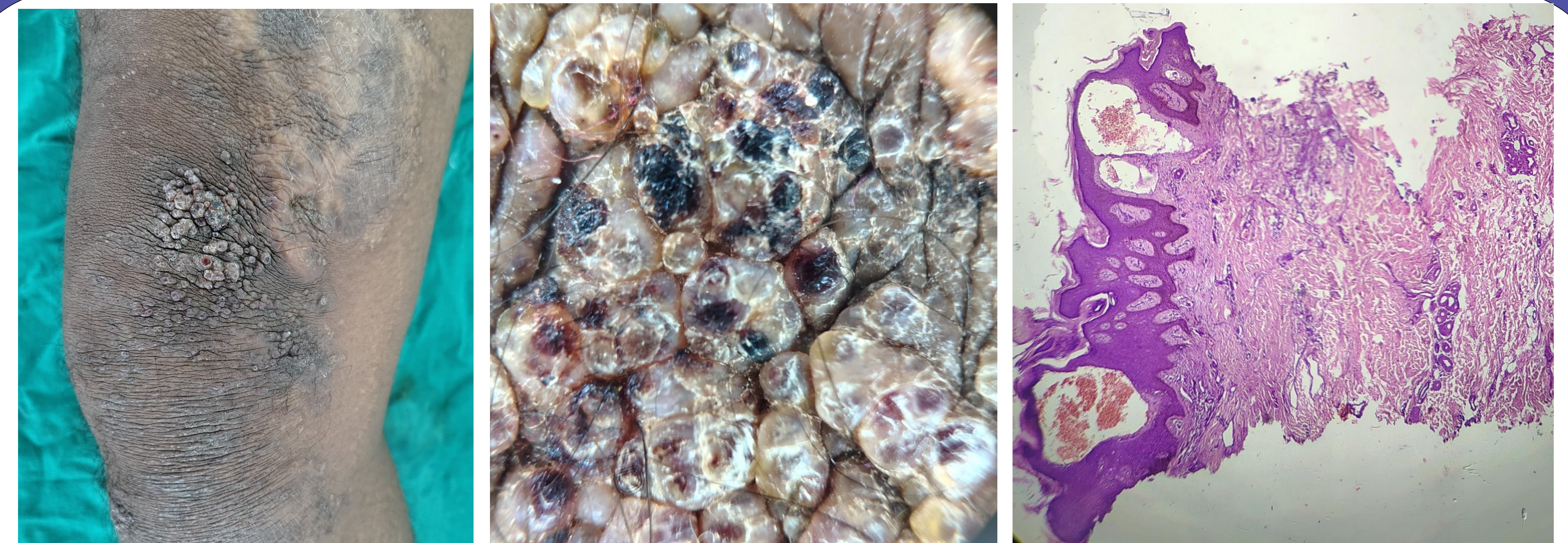
To highlight the diagnostic challenge posed by atypical angiokeratomas on the extremities, which may clinically mimic Verrucous hemangioma, Kaposi sarcoma, or Verruca vulgaris, and to emphasize the pivotal role of integrating clinical, dermoscopic, and histopathological findings for accurate diagnosis and management.

## **Methods**

A young adult male presented with multiple hyperpigmented, verrucous papules clustered over his left leg, evolving gradually over several years. The lesions, though asymptomatic caused cosmetic concern. Differential diagnoses included verruca vulgaris, lichen amyloidosis, and angiokeratoma. Dermoscopic examination revealed classic features: dark lacunae, a whitish veil, red-to-purple lacunae, and surface scale. A skin biopsy was performed, and histopathology demonstrated dilated capillaries in the papillary dermis, with overlying epidermal hyperkeratosis and acanthosis, confirming localized angiokeratoma.

## **Results**

Dermoscopically, the presence of **dark lacunae** (representing thrombosed dilated vessels) and a **whitish veil** (indicating hyperkeratosis and acanthosis) are highly specific for angiokeratoma and strongly support the diagnosis .In solitary angiokeratomas, dark lacunae appear in approximately 94% of cases (with ~94% sensitivity and ~99% specificity), while the combined pattern of dark lacunae with whitish veil exhibits ~84% sensitivity and ~99% specificity .



## **Conclusions**

Though benign, angiokeratomas in unusual locations like the limb demand thorough evaluation to differentiate them from malignancies. Dermoscopy offers characteristic, highly sensitive markers that significantly enhance diagnostic accuracy, while histopathology remains confirmatory. Recognizing this triad of clinical presentation, dermoscopic features, and histological confirmation is essential for ensuring precise diagnosis and appropriate management of atypical angiokeratomas.

## **References**

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