



## Cutaneous Secondary Syphilis: “The Great Skin Mimicker”

Fadi Al Akhrass<sup>1,2\*</sup>, Lina Abdallah<sup>1</sup> and Harty Ashby<sup>3</sup>

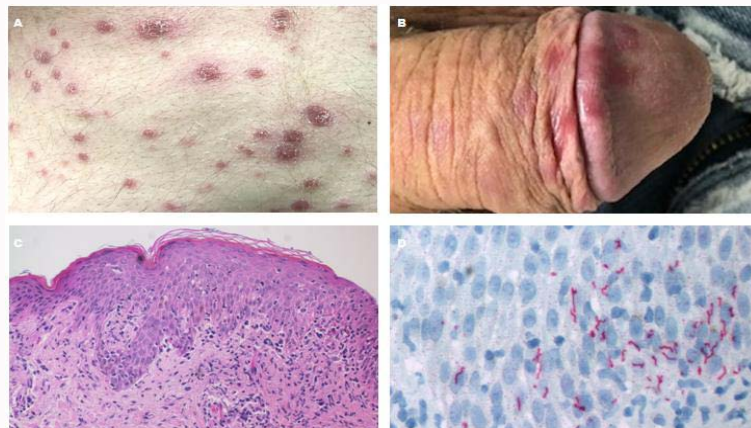
<sup>1</sup>Department of Infectious Diseases and Infection Control, Pikeville Medical Center, USA

<sup>2</sup>Department of Basic Sciences, University of Pikeville, Kentucky College of Osteopathic Medicine, USA

<sup>3</sup>Department of Pathology, Pikeville medical Center, USA

### Clinical Image

A 37-year old man who has sex with men presented to the Infectious Diseases clinic for rash. The rash was symmetrical, diffuse and maculopapular (Figure 1A and 1B). It occurred 5 weeks after the development of multiple genital chancres. The polymorphous tender lesions vary between 0.5 cm to 2.0 cm in diameter. No condylomata lata or oral mucosal lesions were identified. Furthermore, the patient had no signs to suggest meningoencephalitis or optic neuritis. The picture was consistent with cutaneous secondary syphilis. Skin biopsy (Figure 1C and 1D) revealed typical spirochetes and rapid plasma regain came back reactive. HIV 4<sup>th</sup> generation test was non-reactive. Benzathine penicillin G given single dose IM resulted in complete resolution of the rash in 3 weeks. Concomitantly with the opioid crisis, syphilis has re-emerged as an important cause of rash. Timely diagnosis and treatment are pivotal to prevent ongoing transmission and the development of irreversible tissue damage.



**Figure 1:** The epidermis shows spongiosis and exocytosis. Within the dermis there is a superficial and deep perivascular lymphohistiocytic infiltrate which adopts a focal band-like distribution. Rare plasma cells are present (Hematoxylin and eosin, original magnification 20x). Numerous spirochetes are seen in the lower portion of the epidermis (Treponema pallidum stain, original magnification 40x).

### OPEN ACCESS

#### \*Correspondence:

Fadi Al Akhrass, Department of Infectious Diseases and Infection Control, Pikeville Medical Center, Kentucky College of Osteopathic Medicine, USA,

E-mail: fadi.akhrass@pikevillehospital.org

Received Date: 19 Nov 2019

Accepted Date: 27 Nov 2019

Published Date: 30 Nov 2019

#### Citation:

Al Akhrass F, Abdallah L, Ashby H. Cutaneous Secondary Syphilis: “The Great Skin Mimicker”. *Clin Surg*. 2019; 4: 2672.

Copyright © 2019 Fadi Al Akhrass.

This is an open access article distributed under the Creative Commons Attribution License, which permits unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.