Cutaneous Manifestations in Neuroarsenosis

Priyanka Vikas Kashyap¹, Anshul Singh²
¹Assistant Professor; ²Senior Resident, Department of Neurology, All India Institute of Medical Sciences (AIIMS), Bhopal, Madhya Pradesh, India

A 34-year-old male with a background history of psoriasis on intermittent Ayurvedic medicines since the last 3 years, last intake was 3.5 months due to a flare of skin lesions, the patient’s skin lesions responded and he discontinued after 1.5 months of intake. He developed insidious onset progressive quadriparesis since the last 2 months with features of motor, sensory, and autonomic involvement. On examination, the patient had a white transverse line over the finger and toe nails which was non-blanching, and no depression was noted over the nails probably the Mees’ lines (Figs 1A and B), skin examination revealed multiple small hypopigmented spots over the trunk region probably raindrop pigmentation (Fig. 2). Motor system examination showed evidence of peripheral neuropathy. The toxin screen showed an elevated level of serum arsenic 75 μg/L (normal range <35), the patient was not affordable for urine arsenic level hence deferred. The patient was treated symptomatically as his weakness was improving. The patient was explained regarding possible etiology being Ayurvedic medication and to avoid it in the future.

The differential of Mees’ lines includes toxicity due to arsenic¹ and thallium, heart failure,² and renal failure.

Skin and nail inspection is crucial in neurological examination and good knowledge on different patterns of nail and skin changes³ clench the diagnosis without costly investigations. Raindrop appearance in arsenosis may be an indicator of skin malignancy like Bowen’s disease, squamous cell carcinoma, and basal cell carcinoma. Arsenic is a carcinogen and long-duration exposure is more related to it.

References

Figs 1A and B: (A and B) Showing Mees’ lines in finger and toenails

Fig. 2: Showing raindrop pigmentation in the trunk