Hypopigmentation: mycosis fungoides in disguise

Aaron Dehghan,1 Tony Chu2

DESCRIPTION
A 45-year-old man of Indian descent presented to the dermatology clinic with a history of skin changes over the preceding 2 years. On inspection, there were numerous hypopigmented patches on the arms and trunk (figure 1). There was no history of atopy.

The initial suspicion was of tinea versicolor, a common skin condition due to infection with the yeast species Malassezia. Tinea versicolor is characterised by well-demarcated, hyperpigmented or hypopigmented patches found most commonly on the trunk. The patient had been treated for this in primary care; no improvement was observed.

Although more commonly a paediatric condition, pityriasis alba was also considered. However, this condition is characterised by hypopigmented patches that usually affect the face. Note vitiligo causes depigmentation of skin and should not be considered a differential for hypopigmented lesions (figure 2).

Since the above differentials were not consistent with the patient’s presentation, an uncommon cause of hypopigmentation was considered: cutaneous T-cell lymphoma, known as mycosis fungoides. Hypopigmented lesions are themselves a rare manifestation of this disease, typically seen in patients of darker skin types.1

Mycosis fungoides commonly presents between the ages of 45 and 60. It has three clinical stages beginning with a patch phase, the stage at which this patient presented, progressing to a plaque phase and eventually to the tumour stage—which carries the worst prognosis.2 Early stage disease can easily be mistaken for multiple benign dermatoses.3

A skin biopsy and T-cell gene rearrangement studies confirmed the diagnosis and phototherapy was begun as an initial therapy.

Learning points
▸ There are a number of differential diagnoses for hypopigmentation, including tinea versicolor, pityriasis alba and mycosis fungoides.
▸ Vitiligo should not be included in the differential as it causes depigmentation rather than hypopigmentation.
▸ Mycosis fungoides can mimic many skin conditions; a systematic approach to history and examination in dermatology can help to diagnose the rarer conditions such as mycosis fungoides.

Competing interests None.
Patient consent Obtained.
Provenance and peer review Not commissioned; externally peer reviewed.

REFERENCES