



HOLY C.O.W.!

IT'S...

Clinical Question of the Week #30
February 2nd, 2009 through February 9th,
2009

Please e-mail your answers to Kuo, Tim, Wendy, and Kevin (klian@mednet.ucla.edu; tprovias@mednet.ucla.edu; wsimon@mednet.ucla.edu; kbreger@mednet.ucla.edu) by 0800 on Monday, February 9th, 2009. The resident or intern with the most correct answers at the end of each month will receive a prize!

Case: A 49-year-old woman presents to the Emergency Department with progressive rash of her breasts which has been enlarging over the past several hours. She describes the rash as starting as small reddish areas of discoloration, which subsequently grew to involve the right greater than left breast over the next several hours. She does have some localized discomfort and possibly some paresthesia over the area. Given the dramatic findings, she was quite worried and presented to the ED. Her past medical history is notable for diabetes, hypertension, and two deep venous thromboses. Her medications include metformin, lisinopril, simvastatin, and warfarin, which she has been taking for two months since her most recent DVT in the right lower extremity. The remainder of her physical exam is unremarkable except for the skin findings, shown in the image below.



Image of the patient taken at the time of presentation.

Questions:

1. What is the diagnosis?
2. Name two associated risk factors for this condition.
3. What are the characteristic pathologic changes?
4. What disease was this condition first mistaken for when it was first described?