



HOLY C.O.W.!

IT'S...

**Clinical Question of the Week #5
July 28th, 2008 through August 4th, 2008**

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, August 4th, 2008. The resident or intern with the most correct answers at the end of each month will receive a prize!

Case: A 50-year-old man presents with new onset of rash appearing over his chest, back, and face which has been worsening over the past several weeks (Figures 1a, 1b, and 1c below). The rash has also been associated with burning sensation and intense itching. A neighbor had recently seen the patient working in the yard on his garden, and told him to be evaluated because she thought he "had the pox." The patient's medical history is notable for metastatic colon cancer which was refractory to the first-line FOLFOX regimen, but had responded to second-line therapy, as well as a history of hernia repair. He smokes four cigarettes weekly, but does not drink. He had traveled recently to Bakersfield, but had not recently changed his soaps, shampoo, or detergent.



Figure 1a



Figure 1b



Figure 1c

A similar 50-year-old man with a similar story who also had an ancillary procedure as part of his treatment had the following rash (Figure 2).



Figure 2

However, a third 50-year-old man with a similar story had received a different protocol and ancillary procedure and had a different rash appearance (Figure 3).



Figure 3

Questions:

- 1. What is the cause of the rash? What is unique regarding the extent of the rash?**
- 2. Name three associated symptoms/signs.**
- 3. How is the condition treated?**
- 4. What is the cause of the varying findings in the three different patients depicted above?**