PSYCHODERMATOLOGY

GARDNER-DIAMOND SYNDROME: CLINICAL AND BIOLOGICAL APPROACH (2 CASES)

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Background: Gardner-Diamond Syndrome (GDS) is a rare entity characterized by a spontaneous appearance of painful bruises that mostly occurs in females with a psychological profile. We report two cases of GDS.

Observations: Two women of 29 year-old (patient 1) and 20 year-old (patient 2) were admitted for a history of painful and recurrent ecchymotic lesions on the right lower limb (patient 1) and on both legs and forearms (patient 2). There was no history of local trauma, injuries or drug intake. Patients past medical and surgical histories were unremarkable. Lesions started after a quarrel with her boyfriend (patient 2). On examination, there was firm edema with painful ecchymotic non infiltrated lesions of different ages. Complete hemogram, platelet count, complete coagulation profile and antinuclear antibodies were within normal limits. A cutaneous biopsy revealed an extravasation of erythrocytes and a slight inflammatory infiltrate (patient 2). The diagnosis of GDS was suspected. Autologous erythrocyte self-sensitization test was positive in both cases. Intradermal injection of 0.1 ml from a panel of autologous erythrocytes with different hematocrits (40%, 50%, 60% and 70%) on the left forearm caused the development of an oval erythematous macule. Intradermal injection of 0.1 ml of autologous plasma and of saline solution caused no reaction. Psychiatric evaluation revealed a neurotic state (patient 1) and alexithymia with mixed anxiety-depression disorder (patient 2).

Key-messages: Clinicians should think of GDS every time a woman presents with painful recurrent ecchymosis without any abnormalities of coagulations tests mainly in the context of psychiatric disorders or even psychical stress. The autologous erythrocyte self-sensitization test may be helpful.