Morfology

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1) Types of skin lesions

- A lesion is any single area of altered **skin**
- Primary macule, papule, nodule, wheal, vesicle, bulla, pustule
- Secondary scale, crust, fissure, erosion, excoriation
- Other –plaque, cyst
- A rash is a widespread eruption of lesions
- Exanthema generalized, symetric
- Enanthema mucous membranes

• Are the initial manifestation of the disease, unaffected by the course of the disease or manipulation by the patient.





MACULE

- = is a flat lesion, identified only by color change and not palpable
- Large macules- are sometimes called patches
- Example: it can be caused by leakage of blood, changes in the blood flow, hemosiderin, melanin



PAPULE

= A raised lesion, usually defined as less than 1 cm in diameter, a papule may consist of a thickened epidermis, dermis or combination of them

- Larger similar lesions are nodules, they are occupying subcutaneous space
- Example: psoriasis vulgaris, pityriasis rubra pilaris

• Papulopustule – papule with pustule on the top (acne vulgaris)



• Papulovesicule – papule with central vesicule (prurigo acuta)





PLAQUE

= a flat-topped lesions larger than 1 cm in diameter









VESICLE

= a fluid-filled lesion less than 1 cm, herpes simplex, herpes zoster

BLISTER

- = a fluid-filled lesion larger than 1 cm
- The site of fluid may be within the epidermis or subepidermal
- It is either clear or hemorhagic



PUSTULE

= a pus-filled vesicle

-it can be primary (psoriasis pustulosa), or secundary, when a vesicle becomes cloudy (impetigo)



HIVE

= also known as urtica or wheal, this elevated lesion is caused by leakage of fluid from a vessel, it is ussually pruritic and transient, disappears < 24 hours
- Example: urticaria

b) Secondary Lesions

- Are showing changes during next development of the disease, it is caused by degeneration or reparation of the skin, or by influence of external factors



EROSION

A superficial loss of epidermis, caused by ruptured intraepidermal blister or slight trauma

EXCORIATION

A defect in the epidermis, and often the dermis, induced by scratching or manipulationIt is bleeding, it heals with crust without scar



ULCER

A defect in the epidermis and dermis with impaired healing, caused by trauma, impaired vascular supply, tumors, and infections - It heals with scar







FISSURE

A crack or split in the epidermis and dermis - Fissures around circular orifices are known as rhagades



Obr. 3.8. Ragáda, fisura

SCALE

An abnormal accumulation of corneocytes, secondary to excassive epidermal turnover (psoriasis) or delayed shedding

Types include:

- Psoriasiform silvery
- Pityriasiform fine
- Rupiar thick, coarse
- Collarette prominent at the periphery



CRUST

- A surface coating consisting of dried serum, pus, or blood, sometimes with scale.



ATROPHY

Thinning of the skin because of loss of dermis, epidermal atrophy is a microscopic finding



Dermal scar-like induration, such as in morphea or systematic sclerosis

SCAR

The site of repair of a dermal defect, scars may be:

- hypertrophic- thickened
- flat
- atrophic (depressed)

LICHENIFICATION

A distinctive response to inflammation, leading to pronounced skin markings. Rubbing produces epidermal thickening with many small smooth papules, as in lichen simplex chronicus or atopic dermatitis

Description of lesion

- Localisation
- Arrangement
- Size
- Shape (circular, geografical)
- Surface (flat, depressed)
- Borders (sharpened / unsharpened)
- Color (brown-red, yellow, white)
- Consistency









Location and Distribution

- It is important to notice:
- Lesions are single or multiple
- It could create groups with typical arrangement
- Distribution is random or patterned, symmetric or asymmetric
- Localized on certain place
- Disseminated scattered in several places
- Generalized lesions everywhere
- Erythroderma continuous skin involvement

2) Arrangement of lesions

- = can make a group of shapes
- Linear (in the line)
- Anular (circular), circinár (to the ring), semicircinální (into semicircle)
- Herpetiform (grouped vesicles, as in herpes simplex)
- Zosteriform (group of lines)
- Geographical psoriasis







Texture

Some skin lesions have visible or palpable texture that suggests a diagnosis.

Verrucous lesions have an irregular, pebbly, or rough surface. Examples include warts and seborrheic keratoses.

Lichenification is thickening of the skin with accentuation of normal skin markings; it results from repeated scratching or rubbing.

Induration, or deep thickening of the skin, can result from edema, inflammation, or infiltration, including by cancer. Indurated skin has a hard, resistant feeling. Induration is characteristic of panniculitis, some skin infections, and cutaneous metastatic cancer

3) Localization of skin diseases

- = describe where the lessions are placed
- Predilections = typical localization of each disease
- Intertriginous
- Embolization
- Seborhoic
- Solar

Predilections of atopic dermatitis



Predilections of Psoriasis

• Acute – gutate form

• Chronical





Obr. 12.22. Psoriasis – schéma predilekční lokalizace: a) psoriasis vulgaris, b) psoriasis inversa

• Acute – gutate form

Chronical - psoriasis vulgaris, psoriasis inversa





Predilections of Acne, or rosacea











Predilections of scabies





Intertriginous localization





Embolic localization- drug exantemas



Seborhoic localization





Solar localization



What is what?
































Thank you for your attention