Journal of Clinical and Medical Images

Image Article ISSN: 2640-9615 | Volume 8

A Female Patient of Gardner-Diamond Syndrome

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Received: 28 Oct 2024

Accepted: 28 Nov 2024 Published: 03 Dec 2024

J Short Name: JCMI

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Keywords:

Gardner-diamond syndrome; Autoerythrocyte sensitization syndrome; Psychogenic purpura

Citation:

Niru Das, A Female Patient of Gardner-Diamond Syndrome. J Clin Med Img. 2024; V8(7): 1-2

1. Case Presentation

A 35-year-old female patient presented with multiple painful purpuric lesions over the left cubital fossa (Figure 1) along with history of recurrent similar lesions involving other areas of the body which usually disappear spontaneously. Sometimes episodes were associated with epistaxis, bleeding from mouth or ear. We did a thorough investigation to look for any bleeding disorder or coagulation profile derangement which ultimately reveal nothing. On further probing, her husband told us, the episode generally occurs after an anxiety moment, nervousness or depression related to her family life. We did an autoerythrocyte sensitization test with her blood over the left volar aspect of forearm (Figure 2) which turned out as positive after 3 hours (Figure 3). To put all the information together, we considered it a case of autoerythrocyte sensitization syndrome or psychogenic purpura or Gardner-diamond syndrome. We sent her to psychiatry for further management from where she was put on amitriptyline and chlordiazepoxide with reduction in frequency and severity of the episodes after 1 month of follow up. Gardner-diamond syndrome predominantly occurs in female patients and usually presents with painful purpura mainly involving extremeties and develops after an episode of emotional stress or minor trauma. Diagnosis is done by injecting autologous blood to elicit autoerythrocyte sensitization. Treating underlying psychiatric disorders is the cornerstone in achieving cure [1-3].

2. Learning Point

1. An unusual case for clinicians 2. Epistaxis and bleeding from ear are extremely rare presentation



Figure 1: Picture showing multiple discrete well defined purpuric spots over the left cubital fossa.



Figure 2: Picture showing autoerythrocyte sensitization test done over the left volar aspect of forearm and normal saline taken as control.

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Figure 3: Picture showing a well-defined erythematous macule appeared after 3 hours.