

# Linear Morphea in South Asian Females - 2 Case Reports

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## 1. Introduction

Morphea or localized scleroderma is a rare, chronic, inflammatory autoimmune skin disease causing sclerotic changes in the skin of an individual. It affects 3 per 100000 people more in females [1]. It is characterized by discolored patches of skin that eventually hardens. Mayo clinic classification of morphea [2] includes:

- 1) Plaque morphea,
- 2) Generalized morphea,
- 3) Bullous morphea,
- 4) Linear scleroderma
- 5) Deep morphea

Treatment options include immunosuppressant like methotrexate, corticosteroids, cyclosporine, vitamin-D supplements, psoralen-UVA photochemotherapy[3]. Here we are presenting two case reports of Linear Morphea (affects arms and legs changing joint mobility) in two females from India

### Case report- 1

A twenty-year-old female visited a government hospital in Warangal to OP department of dermatology with the complaints of discolored patch on left forearm, painless, thinning of skin since 3 months. Hemoglobin levels were 9g%. She was suggested to have biopsy and x-ray. 4.5mm punch Biopsy from right forearm revealed thinning of epidermis, mild hyperkeratosis, dermis showing increased fibro collagenous tissue, inflammatory cell infiltration in adnexal structures. On the other hand, X-ray (fig 1) showed calcification on the left forearm. Patient was given methotrexate and prednisolone in a combination for treatment. Other medications include multivitamins and iron supplementation.

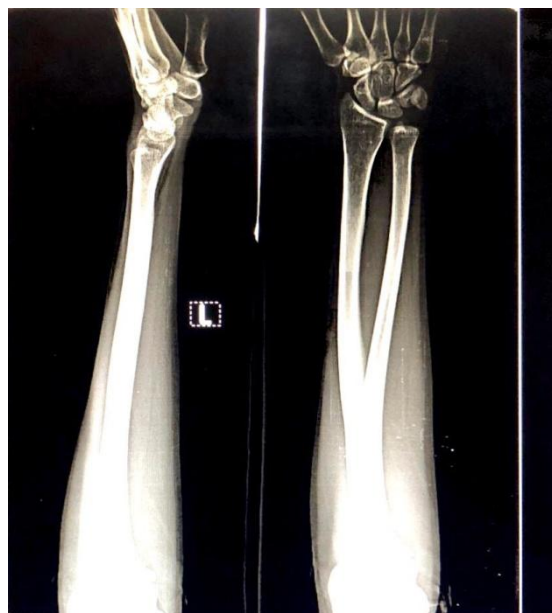


Figure 1: X-ray showing calcification



Figure 2: Sclerodermic changes in the forearm

### Case report-2

A fifty-year-old female patient visited female OP department of dermatology in Warangal with the complaints of ill defined itchy patch over left leg but painless, thinning of skin on leg since 6 months. She was suggested for a biopsy. A 4mm punch biopsy from left leg revealed thinning of epidermis, hyperkeratosis, dermis shows diffuse infiltration of lymphocytes. She was given methotrexate and prednisolone for the treatment.



**Figure 3:** Sclerodermic changes in left leg

## 2. Discussion

Morphea is a rare skin condition mostly affecting adults[4]. Linear morphea affects hands and legs impairing the joint movement. It may be caused due multiple factors like genetic factors, vascular abnormalities, viral or bacterial infection. Here are the two case reports on Linear morphea affecting forearm and left leg on two patients. Here to our patients combination of methotrexate and prednisolone were given. Future management and disease prognosis includes regular follow ups and proper care to the patient.

## References

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