

# Pitfalls in Dermatology

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# Overview

- Spot diagnosis with photos
- Clinical features of conditions
- Treatment of conditions
- Potential complications of certain treatments



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# Rosacea

- Chronic rash involving central face
- Between age 30 and 60 years
- Frequent blushing or flushing
- Telangiectasia, papules and pustules
- Aggravated by sun, spicy food

# Treatment

- Never apply topical steroid
- Topical treatment: Metronidazole gel, Azelaic acid cream, Ivermectin cream, Brimonidine gel
- Oral treatment: Tetracyclines, Isotretinoin
- Vascular laser

# Steroid rosacea



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# Steroid rosacea





# Steroid rosacea

- Rosacea-like condition on mid face
- Caused by potent topical steroids or their withdrawal
- Papules, pustules, telangiectasia

# Treatment

- Discontinue topical steroids
- To minimise severe flare, slow withdrawal recommended by reducing potency
- Non oily emollients
- Topical pimecrolimus cream
- Oral tetracycline
- Vascular laser



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# Tinea

- Dermatophyte infection on skin
- Acute – itchy inflamed erythematous & can be pustular
- Chronic – round or oval red scaly patches with central clearing

# Treatment

- Topical antifungals
- Oral antifungals if topical treatment unsuccessful



# Tinea incognita

