

# International

### Original Research Paper

## PERI NEVOID ALOPECIA: A RARE AND INTERESTING TRICHOLOGICAL PHENOMENON.

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#### **KEYWORDS:**

#### INTRODUCTION

Alopecia areata is a very common yet not fully understood clinical entity with numerous variants, multiple therapeutic options and variable outcomes. We describe a patient with a rarely reported perinevoid variant of alopecia (also known as perinevic alopecia/nevocentric alopecia), where alopecia is present around pigmented nevus probably as a result of inflammatory targeting of nevus structures.

#### Case Report

A 16-year-old otherwise healthy male presented with incidentally observed two patches of hair loss of the scalp. These were not associated with any history of trauma, pain, itching, burning sensation or application of any topical therapy and no similar lesions were noted by the patient earlier. On dermatological examination two almost identical, symmetrically bilateral patches of non-scarring alopecia on parietal scalp surrounding central pigmented nevi, with exclamation mark hair and vellus hair appreciable on magnifying hand lens were noted. Pityriasis capitis was also noticed. The patient had noticed them about two weeks prior to presentation in the out patients department.



Figure ,2: pictures showing patches of non-scarring alopecia on scalp surrounding central pigmented nevi, with exclamation mark hair and vellus hair appreciable on magnifying hand lens.

Nails and mucosae were normal and other medical history and systemic examination were unremarkable. The thyroid status and hematological parameters were normal but consent for skin biopsy for histopathological examination could not be obtained. The patient was diagnosed as a case of perinevoid alopecia and treated with intralesional triamcinolone acetonide injection (5mg/ml) and topical solution of 5% minoxidil, azelaic acid and tretinoin for once daily application Patient did not turn up for follow up which was advised at 3 weeks interval.

#### DISCUSSION

Although alopecia areata is one of the most common hair disorders presenting in dermatological practice perinevoid alopecia is a rarely described variant of alopecia areata. It was reported by Yesudian and Thambiah [1] in three case series having pigmented central nevus while Seok Min Kim et al. [2] described it around a skin colored papular nevi. Exact etiopathogenesis is not known but appears analogous to halo nevus phenomenon described in various dermatological

conditions. In classically described halo phenomenon around a nevus, there is destruction of melanocytes causing depigmentation (Sutton nevus or Leukoderma acquisitum centrifugum) but here the primary target of inflammation is surrounding hair follicles, attributed to melanocyteassociated T-cell epitopes by Gilhar et al. [3]. Histopathology shows presence of nevus cells along with inflammatory infiltrate around the hair follicles and nevus cells. Regrowth of hair after surgical removal of central nevus has been observed but whether it alters the natural course of the disease remains debatable. [1,3]

#### REFERENCES

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