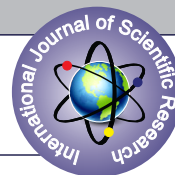


REPEATED EPISODES OF VITAMIN B12 DEFICIENCY WITH HYPERPIGMENTATION OF PHALANGES OF DORSUM OF FEET – A RARE CASE REPORT



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ABSTRACT

Cutaneous manifestation of vitamin B12 deficiency helps in early diagnosis of it. Here we reported a case of vitamin B12 deficiency who presented with nonitchy hyperpigmented macular lesion of phalanges of both feet. Patient was treated with intravenous vitamin B12 followed by oral B complex tablet. Disappearance of macular lesion started after two weeks.

KEYWORDS

Vitamin B12, Nutritional anaemia, Covid-19 virus, Hyperpigmented macular lesion

Case Report

A 31 year old female patient came with a complaint of fever, sore throat, body pains for 2 days at the ent opd in may 2021. She had no other comorbidities. She was vegetarian. Her covid 19 rat was done. She came positive. She was treated with oral antipyretics, chlorhexidine gargles, oral antiallergics, oral azithromycin and kept in isolation for 14 days. Her fever was subsided after 5 days. She started headache and dry cough on 6th day of her illness. She was advised steam inhalation, topical nasal decongested, oral analgesics, oral mucolytics. her headache was subsided on 10th day but cough was persistent for three weeks. Patient noticed hyperpigmentation on the feet after one month of illness. On examination, she had nonitchy, hyperpigmented, macular lesion predominantly on the dorsum middle phalanges of the toes of both feet. There was no rash or dermatitis preceding the onset of hyperpigmentation. This was only her physical physical sign. Clinical examination was otherwise normal. There were no features suggestive of autoimmune disorder. Her vitamin b12 level was 193pg/ml while reference range was 211-946pg/ml. she was started on injection of vitamin B12 intravenous followed by vitamin B complex tablet. She had similar episode previously postviral fever in feb 2020 and treated with oral vitamin B12 for 3 months. At that time her covid 19 test was not done. Currently she again had developed cutaneous manifestation at her feet after 2 weeks post upper respiratory tract viral fever. Her covid 19 rat was negative.

REFERENCES

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DISCUSSION

There can be variable presentation of vitamin B12 deficiency. It can cause hematological, neuropsychiatric, and mucocutaneous manifestation. there can be hyperpigmentation of dorsum of hand and feet. these patients are usually presented with the other signs like megaloblastic anemia, pancytopenia, or neurological deficits.¹ We reported a case with vitamin b12 deficiency, having isolated cutaneous hyperpigmentation of dorsum of feet both side mainly affecting the middle phalanges. Srivastava A et al¹ reported a case of nutritional vitamin b12 deficiency and found isolated cutaneous hyperpigmentation. This patient was treated with oral therapy. We found that cutaneous manifestation helps in the early diagnosis of vitamin B12 deficiency before the development of other manifestation.¹ McCaddon A et al² suggest that SARS-CoV-2 induces an increased demand for methyl-groups whilst simultaneously impairing their supply due to viral-induced oxidative stress.² We have found that there were repeated episodes vitamin B12 deficiency post viral infection that was treated with intravenous as well as oral therapy.

Declaration of patient consent

We certify that we have obtained all appropriate patient consent form. In the form the patient has consent for her images and other clinical information to be reported in the journal. The patient understands that her name and initials will not be published and due efforts will be made to conceal their identity, but anonymity cannot be guaranteed.

Financial support and sponsorship

Nil.

Conflicts of interest

There are no conflicts of interest.