Connexions module: m15024

IMAGES OF MEMORABLE CASES: CASES $84 \& 85^*$

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External Image

Please see:

http://rup.rice.edu/memcases-button.jpg

Exercise 1 (Solution on p. 2.)



The patient on the left had a deep vein thrombosis, while the patient on the right had rheumatic mitral stenosis with atrial fibrillation.

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Solutions to Exercises in this Module

Solution to Exercise (p. 1): 84 & 85. Coumarin-induced skin necrosis

A rare and unpredictable complication of oral anticoagulation therapy, affecting women more than men. The skin necrosis typically appears on the third to fifth day of therapy, but always within the first two weeks. Frequent areas of involvement are the buttocks, thighs, and breasts. Fingers, hands, neck, and face are typically spared. The pathogenesis remains speculative, but it clearly is not dose-related. Associated congenital or acquired coagulation deficiencies have been identified in a minority of cases. Besides discontinuing anticoagulation therapy, management may include use of Vitamin K, heparin, fibrinolytic agents, or surgical debridement of gangrenous tissue. Depending on the extent and degree of necrosis, the lesions may heal on their own.