A 54-year-old woman who had had hepatitis C infection for 12 years presented with excess hair on her face, which she had had since the age of 25 years, and new erosions on her hands. On physical examination, several ulcerations, milia, and thickened skin were noted on the dorsal aspect of both hands (Panel A). Excess hair growth (hypertrichosis) was noted in the temporal and malar facial areas (Panel B). Laboratory studies revealed an elevated level of 24-hour urinary porphyrin of 707 µg (851 nmol; normal, <30 µg [36 nmol]). Porphyria cutanea tarda refers to a group of anomalies in which uroporphyrinogen decarboxylase is deficient. Fragility of the skin is noted after sunlight exposure that results in erosions that heal with milia. Patients may also have excess hair growth, urine discoloration, and scleroderma-like plaques. Treatment can include sun avoidance, therapeutic phlebotomy, antimalarial agents, or chelation with deferoxamine. The patient had a good response to phlebotomy.

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