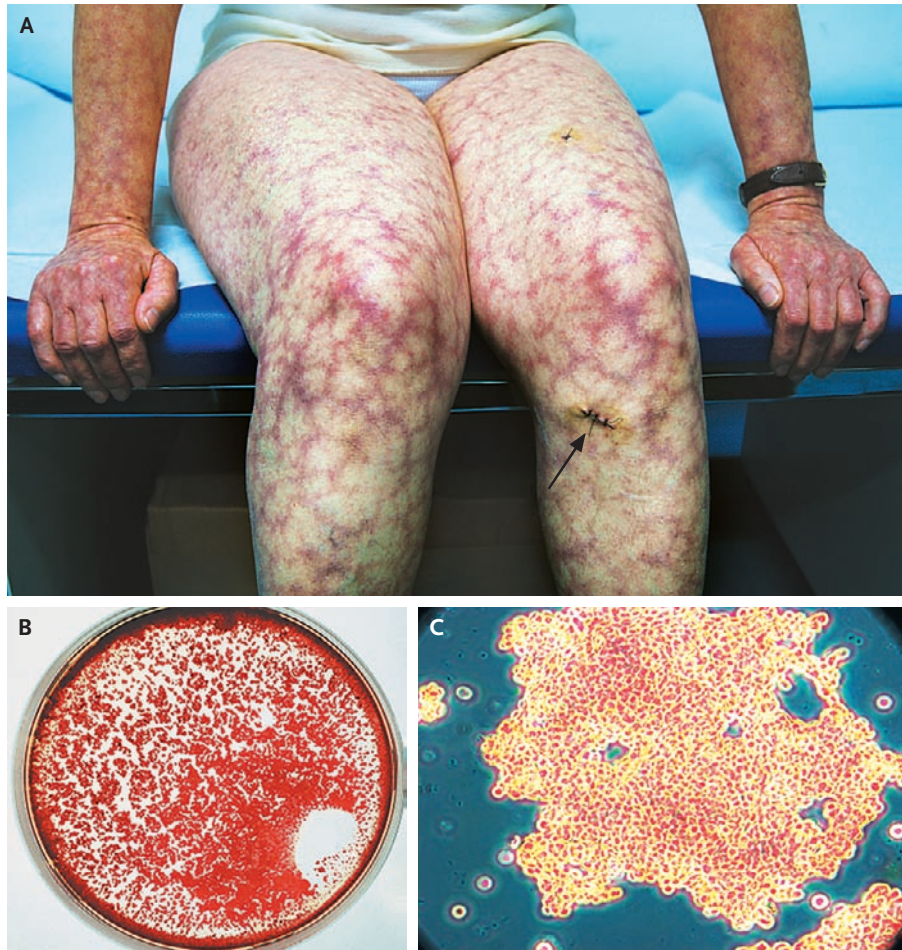


What is the likely diagnosis?

IMAGES IN CLINICAL MEDICINE

Livedo Reticularis and Cold Agglutinins



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A PREVIOUSLY HEALTHY 56-YEAR-OLD WOMAN HAD SPONTANEOUS ERUPTION of a lacy, net-like erythema of her entire skin, which was especially pronounced on her arms and legs (Panel A). The erythema of her lower arms disappeared within 2 minutes after immersion into a water bath at exactly 37°C. Her blood clumped immediately after being drawn and placed in a Petri dish (Panel B). Microscopical examination showed large red-cell agglutinates (Panel C). Results on electrocardiography, echocardiography, radiography, and skin biopsy (Panel A, arrow) were normal, as were the differential blood count and kidney function. There was no evidence of vasculitis or the antiphospholipid-antibody syndrome. There were signs of hemolytic anemia. Cold autoagglutinins with a high thermal amplitude, which pan-agglutinated red cells below a threshold of 33°C, were detected. The antibody titer at 4°C was low (1:64). The high thermal amplitude explains the development of disease despite the low titer of the cold agglutinin. This short-term occurrence of cold agglutinins is spontaneously reversible. If blood products are needed, some recommend the use of warmed blood.

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