# Key Points

- The name of many dermatological conditions are based on the Greek or Latin words to describe the physical appearance of the rash.
- Many conditions in dermatology can have more than one name to describe the same thing.
- Many rashes look similar when examined close up but they can have a predictable distribution which can help in the diagnosis.

## 5.1 Introduction

Dermatology, like any other specialist area such as computers or economics, has its own unique language and terminology. The name of many dermatological conditions are based on the Greek or Latin words to describe the physical appearance of the rash. Knowing the meaning of the words can make it easier to understand the underlying problem and remember the name [1]. For example, the term, **lichen planus**, was derived from the Greek word "**leichen**" meaning "tree moss" and the Latin word **planus** meaning "flat." Lichen planus is a chronic inflammatory dermatosis of unknown origin that causes purple or violet papules and polygonal plaques that are shiny, flat-topped and firm on palpation. It can occur anywhere on the skin, mucous membranes, scalp or nails bur it often starts on the anterior wrists, ankles and lower back in adults.

The word "**pityriasis**" was used by the physician Hippocrates in ancient Greece to describe the scruffy appearance of the skin that looked like it was covered by the fine bran of grain called "pityron". "**Versicolour**" comes from the Latin word "*versus*", or "*vertere*", which means to turn or change color. **Pityriasis versicolor** is a common skin complaint in which fine, flaky, discoloured patches appear mainly on the chest and back mostly in young adults. It can cause hypo or hyperpigmentation that can vary according the seasons and the amount of ultraviolet light on the skin—hence the name = versicolor.

To add to the confusion, many conditions in dermatology can have more than one name to describe the same thing. For example, a seborrhoeic keratosis is also known as a seborrhoeic wart or a basal cell papilloma. Actinic keratosis is also known as solar keratosis. Some conditions in dermatology may have a medical name which is often based on Latin or Greek terms but they may also have a common lay male name. Examples include dandruff (pityriasis capitis), ringworm (tinea corporis) or mole (melanocytic nevus).

Descriptive terms are based on the colour, shape or texture of a lesion or rash. The spatial relationship of rashes or lesions are also important

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**Terminology in Dermatology** 

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to describe, as various skin diseases have a characteristic distribution (isolated, clustered, satellite lesions, dermatomal, etc.). Many rashes look similar when examined close up but they can have a predictable pattern which can help in the diagnosis (e.g. psoriasis usually affects the backs of the elbows and front of the knees whereas atopic dermatitis usually has the opposite distribution).

# 5.2 Descriptive Terms [1]

- Lesion = a single area of altered skin. It may be solitary or multiple, isolated or diffused.
- **Rash** = a widespread eruption of lesions.
- **Tumour** = a solid mass of the skin or subcutaneous tissues. A tumour can be benign or malignant.
- **Dermatitis** = inflammation of the skin; it is not a definitive diagnosis. There are many types of dermatitis. The term "dermatitis" and "**eczema**" mean the same thing.
- **Eruption** = a break out or becoming visible (e.g. drug eruption).
- **Exanthem** = another term for a rash (e.g. childhood viral exanthems).
- **Tinea** = the name of a group of diseases caused by a fungus.

# 5.3 Colour

- Erythema/erythematous = redness secondary to vasodilation which blanches on pressure.
- **Telangectasia** = persistant, visibly, dilated blood vessels on the skin or mucosal surface ("broken veins").
- **Erythroderma** = a skin condition which affects all or nearly all of the skin which is red all over (e.g. erythrodermic psoriasis).
- **Purpura** = bleeding into the skin. If they are small they are called **petechiae** (small <3 mm, red, purple or brown spots). Like a bruse, purpura does not blanch with pressure and is 3–10 mm in diameter. Palpable purpura is usually a sign of vasculitis.
- Ecchymosis = discoloration of the skin as a result of bleeding underneath = bruising >10 mm.

- **Pigmentation** = any shade of brown, black, grey or blue resulting from the presence of melanin at different depths in the skin.
- **Non-pigmented** = skin coloured, red, purple or white.
- **Hyperpigmentation** = excessive colour in the skin that causes it to be darker than the normal background skin.
- **Hypo-pigmentation** = loss of melanin causing the skin to be paler than the normal surrounding skin but not completely white.
- **Leukoderma** = white skin (e.g. vitiligo).
- Alba = comes from the Latin "albus" meaning white.
- **Leukonychia** = whiteness of the nails.

## 5.4 Shape or Configuration of Lesions

- **Annular** = lesion or rash in a circle or ring shaped such as ringworm or granuloma annulare (Fig. 5.1).
- **Discoid** = a disc or coin shaped circular lesion (it is also called nummular).
- **Linear** = in the shape of a straight line such as scratch marks or striae in pregnancy.
- **Polygonal** = varied, non-geometrical shape.
- **Polymorphic or multiform** = various different shapes.
- **Gyrate** = a rash that is whirling in a circle.
- **Serpiginous** = snake-like.
- **Poikiloderma** = a mixture of areas of hypopigmentation, hyperpigmentation, telangiectasias and atrophy (e.g. Poikiloderma of Civatte).



Fig. 5.1 Anular rash of Granuloma annulare

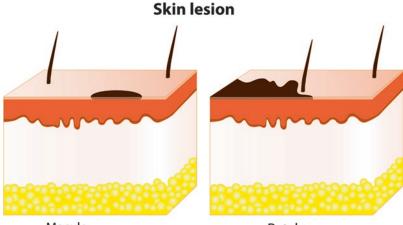
- Wheal (or weal) = papule or plaque like with oedematous elevation caused by swelling in the dermis with a smooth skin surface (e.g. urticaria).
- **Flare** = erythema of the skin as a result of vasodilation often surrounding a wheal.
- **Target lesion** = a series of concentric rings like a dartboard (e.g. erythema multiforme) also known as **iris lesions**.
- **Reticular** = net-like lesions or rash (like the shape of a net curtain)

## 5.5 Texture or Morphology of Skin Lesion and Rashes

• **Macule** = flat discoloration less than 1 cm (e.g. flat mole) (Fig. 5.2).

- **Patch** = flat discoloration greater than 1 cm (e.g. lentigo maligna) (Fig. 5.2).
- **Papule** = palpable elevation less than 1 cm (e.g. acne spot) (Fig. 5.3).
- **Nodule or tumour** = a solid, palpable elevation greater than 1 cm (e.g. acne nodule) (Fig. 5.4).
- **Plaque** = a palpable lesion greater than 1 cm in diameter formed by the extension or coalescence of either papules or nodules (e.g. plaque psoriasis, granuloma anulare). Most plaques are elevated but a plaque can also be a thickened area without being visibly raised above the skin surface (Fig. 5.3).
- **Maculopapular** = a raised lesion or rash that is flat on the top (e.g. plaques of psoriasis).
- **Cyst** = epithelium lined cavity containing fluid or semi-solid material which may be

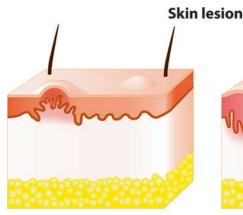
Fig. 5.2 Macule and patch. SKIN LESION© [designua]/123RF.COM Image ID 50902545. Media Type : Vector. https://www.123rf.com/ profile\_designua? page=1&word=skin+lesi on+&reverse\_search\_ mobile=&mediapo pup=50902545



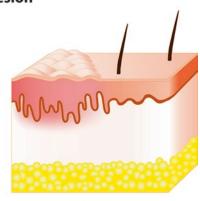
Macule

Patch

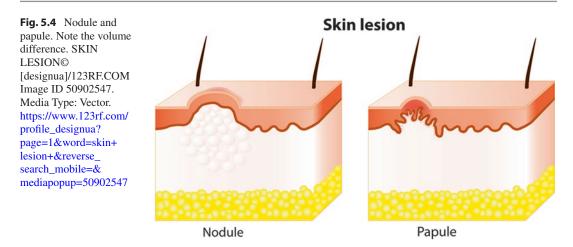
Fig. 5.3 Papule and plaque. SKIN LESION© [designua]/123RF.COM Image ID 50902546. Media Type : Vector. https://www.123rf.com/ profile\_designua? page=1&word=skin+lesi on+&reverse\_search\_ mobile=&media popup=50902546

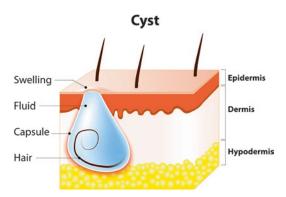


Papule



Plaque





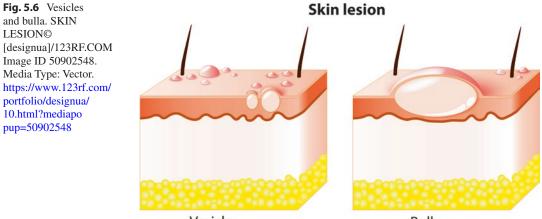
**Fig. 5.5** Sebaceous cyst. SKIN LESION© [designua]/ 123RF.COM Image ID 50159201. Media Type: Vector. https://www.123rf.com/portfolio/designua/10.html?medi apopup=50159201

fluctuant (a fluid filled nodule such as in cystic acne) (Fig. 5.5).

- Abscess = a puss filled cyst = usually infected.
- **Vesicle** = a papule containing fluid less than 5 mm (e.g. herpes simplex) (Fig. 5.6).
- **Bulla** = a large vesicle more that 5 mm in diameter (e.g. bullous pemphigoid) (Figs. 5.6 and 5.7).
- **Pustule** = a vesicle filled with pus (neutrophils) which may be yellow or white. This does not always imply infection (e.g. acne pustule).
- **Crust** = dried sebum, pus, or blood usually mixed with epithelial and sometimes bacterial debris (also called **eschar**).
- Scale = increased dead cells stuck together on

the skin surface (also called hyperkeratosis).

- **Desquamation** = skin shading off in scales.
- **Psoriasiform** = large white or silver flakes like psoriasis.
- **Pityriasiform** = fine, powdery scale.
- **Morbiliform** = a rash that looks like the rash of measles (macular lesions that are red and are usually 2–10 mm in diameter but may be confluent in places).
- **Scarlatiniform** = looks like the rash of scarlet fever (numerous small red papules widely distributed in the skin)
- Lichenoid (Lichen) = scale tightly adherent to the skin surface like lichen on the rock at the seaside.
- **Lichenification** = caused by chronic rubbing, which results in thickened skin with increased skin markings and lichenoid scale (Fig. 5.8).
- Keratotic (Keratosis, hyperkeratosis) = horny scale with rough keratin (actinic keratosis).
- **Exfoliation** = skin peeling.
- **Maceration** = moist, peeling skin.
- **Dermatographism** is the ability to write on skin = scratching the skin surface creates a wheel flare type reaction (e.g. urticaria).
- **Keloid** = an exaggerated connective tissue response of injured skin that extends beyond the edge of the original wound.
- **Hypertrophic scar** = an exaggerated connective tissue response of cut or incised skin that does <u>not</u> extend beyond the edge of the original wound.



Vesicle





Fig. 5.7 Bullae in a patient with bullous pemphigoid

## 5.6 Feel, Form or Structure of a Lesion

Papules may be:

- **Dome shaped** = round on top like the dome of a mosque.
- **Filiform** = thread-like or small protrusions like a filiform wart.
- Flat topped
- **Pedunculated** = with a stalk.
- **Sessile** = without a stalk.
- **Umbilicated** = with a central depression (e.g. molluscum contagiosum).
- **Verrucous** = warty-like.

#### Lesions or rashes may be:

- **Depressed** = sunken under the skin.
- **Atrophic** = thinned out.
- **Hypertrophic** = thickened or raised up off the skin.



Fig. 5.8 Lichenification of the low back

- Soft, firm, hard, hot or cold.
- **Fluctuant** = the movement within a swelling when it is examined by touch. It is a sign that the swelling contains fluid.
- Sclerosis = Localised hardening of skin.
- Mobile or fixed.

# 5.7 The Distribution of a Rash

Describes how rashes or lesions are scattered or spread throughout the skin (skin lesions may be isolated, solitary (single) or multiple. They can be localised or diffused.

- **Unilateral** = a rash or lesion that is predominately on one side of the body.
- **Bilateral** = affects both sides of the body or specific region.
- **Symmetrical** = equal distribution on both sides of the body.

- **Truncal** = rash or lesions mainly confined to the trunk but not affecting the limbs, head or neck.
- **Flexural** = rash or lesion affecting the flexures (the bends or folds in skin such as the front of the elbows, back of the knees, around the neck in the axillae and groin creases).
- **Extensor** surfaces = the opposite side to the flexured surfaces.
- Acral = affecting the distal portions of the limbs, hands or feet.
- **Dermatomal** = a rash or lesion that runs along a dermal distribution (e.g. shingles).
- **Follicular** = lesions that arise out of hair follicles such as papules or pustules. They may be solitary or grouped into confluent plaques.
- **Herpetiformis** = groups of small vesicles like herpes simplex or herpes zoster.
- Köebner phenomenon (Köebnerisation) = refers to the tendency of a skin condition to affect areas that have been damaged due to injury such as scratching, laceration or burning. Common skin conditions that often demonstrate the Köebner phenomenon include psoriasis, lichen planus, vitiligo, warts and Darier disease (Fig. 5.9).
- **Fig.sensitivity** = Rashes or lesions that occur only on the exposed areas such as the face, the "V" area of the neck and the dorsum of the hands and lower legs.
- **Seborrhoeic** = a tendency towards oily skin (seborrhoea). The seborrhoeic area refers to those parts of the body that have a higher density of oil/sebum produced in glands such as the scalp, the eyebrows, the nasolabial folds, the post auricular area, over the sternum and the interscapular area of the back.



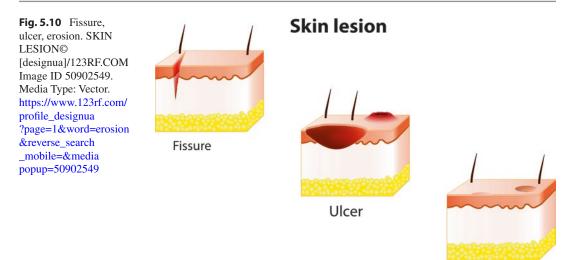
Fig. 5.9 Köbner (Koebner) phenomenon in a patient with psoriasis

- **Discrete** = remains alone.
- **Clustered** = grouped together.
- **Confluent** = flowing together or merging
- **Guttate** = the Latin word for drops = i.e. looks like someone sprinkled the skin with drops.
- **Satellite** = a rash or lesion surrounded by numerous, smaller lesions or rashes located adjacent to the main lesion or rash, e.g. candidiasis.

# 5.8 Secondary Skin Changes

These are usually as a result of scratching, picking or infection:

- Lichenification = thickening and accentuation of the skin as a result of the chronic rubbing or scratching (e.g. lichen simplex chronicus) (Fig. 5.8).
- **Crusting** = arises as a result of plasma exudating through an eroded epidermis. Crust is usually yellow or brown and may ooze. Epidermal crusts may contain blood which can make them look more red, purple or black.
- **Dystrophy** = degeneration or abnormal morphology of the skin or nails.
- **Excoriation** = scratching which removes epidermis and causes bleeding or oozing. They are often linear.
- **Prurigo** = chronic skin disease with the eruption of pale, dome-shaped papules that itch severely and may be aggravated by picking and scratching. There can be many causes (e.g. purigo nodularis).
- **Erosion** = loss of the surface of the skin in the upper most layers causing a shallow, moist or crusty ulcer (Fig. 5.10).
- **Fissure** = a linear crack or break in the skin with abrupt side walls often due to excessive dryness (e.g. angular stomatisis, anal fissure) (Fig. 5.10).
- **Fungating** = a large tumour that erupts like a mushroom or fungus.
- **Granulation tissue** = formation of new capillaries and fibrous tissue in a healing wound that looks soft and red.



Erosion

- Ulcer = circumscribed loss of tissue. Ulcers may be superficial, deep or full thickness (Fig. 5.10). They may be covered or hidden by a dark coloured crust called eschar.
- Scar = permanent fibrotic changes that occur after healing of damaged to the dermis. Scars can be atrophic, hypertrophic, hypo or hyper-pigmented.
- **Granuloma** = this is an histological term. When a pathologist sees chronic inflammation and giant cells in the skin as a result of certain infections (e.g. tuberculosis, leprosy) or inflammatory skin diseases such as granuloma annulare or sarcoidosis.
- **Granulomatous Diseases** = those with the histological features of granuloma.
- **Nikolsky's sign** = is a skin finding in which the top layers of the skin slip away from the lower layers when slightly rubbed.

# 5.9 Nail Changes

- **Onychogryphosis** = thickening of the nail (not necessarily fungal in origin).
- **Nail dystrophy** = disruption of the nail surface.
- **Lamellar dystrophy** = splitting of the distal end of the nails in a horizontal plain (also known as onychoschizia).

- **Onycholysis** = lifting of the nail from the nail bed.
- **Pitting** = small indentations in the nail as if they were damaged with a sharp needle (e.g. psoriasis, alopecia areata, eczema).
- **Koilonychia** = spoon nails (e.g. with iron deficiency).
- **Clubbing** = increased curvature in both planes (e.g. lung cancer, valvular heart disease).
- **Subungual** = under the nail.
- **Periungual** = around the nail.
- **Pterygium** = a forward growth of the cuticle over the nail.

# 5.10 Conclusion

There are many confusing and difficult terms used to describe lesions and rashes in dermatology. Many are derived from Greek or Latin. It is important to learn off these terms as they are the basic tools used to describe skin conditions and the descriptive terms are often used to make a named diagnosis.

## Reference

 Ways to describe skin lesions – You Tube Video. https://www.youtube.com/watch?v=7pO0JaKZcts