

Drug-related skin and atherosclerotic plaque pigmentation

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Images in vascular medicine

Drug-related skin and atherosclerotic plaque pigmentation

Teresa L Carmana and Sean P Lydenb



Panel A

A 67-year-old woman with long-standing rheumatoid arthritis was admitted for bilateral femoral to anterior tibial artery bypasses for gangrenous toes. She was noted to have chronic skin pigmentation changes affecting her legs, arms and her face, which started after using minocycline (Panels A and B). Blue-black pigmentation is a well-recognized side effect of minocycline therapy. The most commonly involved sites include the skin, oral cavity, teeth, bones, and thyroid. Similar pigmentation changes were noted in the common femoral artery and anterior tibial artery walls at the time of endarterectomy and bypass surgery (Panel C). Very few reports of atherosclerotic plaque pigmentation involvement have been published. Spepite the pigmented appearance of the arterial wall, uneventful revascularization was accomplished. She did eventually require amputation of her necrotic digits.



Panel B



Panel C

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