

## Amyopathic Dermatomyositis

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A 48-year-old man presented with rash, cough, shortness of breath, and arthritis. He had experienced fatigue, fevers, and weight loss of more than 6 months' duration. Examination revealed an increased respiratory rate and hypoxia; fine crackles were audible in both lung bases. Multiple joints were arthritic, but muscle weakness was not clinically evident. This patient had classic findings of dermatomyositis, including a heliotrope rash (Figure 1), Gottron sign (Figure 2), "mechanic's hands" (Figure 3), and the V-sign (Figure 4).

Dermatomyositis is an idiopathic microangiopathic disorder that affects the skin and muscles. It is thought to be caused by deposition of complement in the blood vessels.<sup>1</sup> Most patients experience symmetric proximal muscle weak-

ness. The diagnosis is made by typical skin findings and evidence of muscle injury.<sup>1</sup> Notably, this patient had a variant of dermatomyositis called *amyopathic dermatomyositis*, which manifests without muscle involvement.<sup>2</sup> He also had interstitial lung disease, which has been associated with the amyopathic variant as well as with classic dermatomyositis.<sup>3</sup>

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FIGURE 1. Heliotrope rash is an erythematous rash around the eyes with associated edema.



FIGURE 3. "Mechanic's hands" are characterized by roughening and fissures of skin on the lateral and palmar areas of the fingers.



FIGURE 2. Gottron sign is evidenced by a scaly raised erythematous rash on the dorsum of the hand on the metacarpophalangeal and proximal interphalangeal joints.



FIGURE 4. The V-sign is violaceous erythema on the chest and neck.

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