Attention history buffs and aficionados of medical arcana. Here’s something for you.

Pellagra (pelle agra, rough skin) is traditionally portrayed as a niacin-deficiency disorder resulting from a diet of three Ms—meat (fatback), meal (corn-meal), and molasses—and manifesting clinically as four Ds (dermatitis, diarrhea, dementia, and death). Approximately one-fifth of pellagrins, however, manifest a fifth D—“dyssebacia” (1). In this report, I summarize the essential features of “dyssebacia” and illustrate this finding in three patients.

“Dyssebacia” is the name coined to describe numerous plugs of inspissated sebum projecting from dilated orifices of sebaceous glands (Figures 1–4). Histologically, the glands show hyperplasia with sebaceous material plugging dilated follicles. On palpation, the plugs feel like sharkskin or sandpaper. They first appear along the alae nasi, then spread over the nose, and in advanced cases, involve the forehead, lips, and chin. When small, the plugs reflect light and mimic sulfur flakes. The larger plugs range in color from white to grayish yellow, occasionally with darker tips. Their

Figure 1. Nasal area of a 65-year-old woman with pellagra showing diffuse sebaceous plugging, especially prominent on the left.

Herbert L. Fred

Figure 2. Side view of the patient in Figure 1 showing plugs over the nose, cheek, forehead, and scalp.
“Dyssebacia”—A Fifth D of Pellagra

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prevalence increases with age of the patient and is higher in blacks than in whites.

In contrast to pellagral dermatitis, which is inflammatory and typically develops on sun-exposed surfaces (Figure 5), “dyssebacia” is not inflammatory, is usually confined to the face, and is unrelated to sunlight. Furthermore, it sometimes precedes the dermatitis by weeks to months (2). With niacin therapy, the sebaceous plugs fall out within several days, and the lesions clear completely within a week or so.

COMMENT

The three patients shown here came under my care 40 years ago. Since that time, pellagra has virtually disappeared in the United States. Nevertheless, it still occurs elsewhere—even in epidemic proportions (3)—and we still need to know what it looks like.

References


Figure 3. Right paranasal and infraorbital area of a 63-year-old pellagrin with typical sebaceous plugging.

Figure 4. Nasal area of patient in Figure 5 showing diffuse sebaceous plugging.

Figure 5. A 47-year-old man with classic pellagral dermatitis—scaly, reddened, and hyper-pigmented lesions distributed symmetrically over sun-exposed surfaces.