

**CASE 37-2**

A 25-year-old man presents with a 6-week history of intensely pruritic papules on his wrists, axillae, elbows, and penis.



**What is the one most likely diagnosis?**

- (A) Scabies
- (B) Lichen planus
- (C) Psoriasis
- (D) Dermatitis herpetiformis
- (E) Allergic contact dermatitis

The correct answer is (A), scabies.

Scabies presents with multiple excoriated, pink papules on finger webs, flexural areas, elbows, knees, genitals, and volar wrist, as seen in the patient in this case.

Psoriasis and lichen planus can be seen in similar locations, but the lesion morphologies of these dermatoses are different. Lesions of lichen planus are typically flat-topped, well-defined, polygonal, violaceous, shiny papules, classically with an overlying white lacy scaly. The lesions of psoriasis are variable depending on the subtype. Guttate psoriasis also presents with small pink papules, but the lesions are usually not pruritic and have a characteristic silvery scale. Similar to scabies, dermatitis herpetiformis is intensely pruritic, but the distribution is different, with lesions typically located on the extensor extremities, elbows, knees, buttocks, scalp, and neck. Allergic contact dermatitis is also very pruritic, but would be unusual in this distribution, which is classic for scabies.