Abstract

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A rare case of “Blue finger”

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Background

Ant phospholipid syndrome (APS) is one of the most common acquired causes of hypercoagulability. Its major presentations are thrombotic (arterial, venous, or micro vascular) and pregnancy morbidity (miscarriages, late intrauterine fatal demise, and severe pre-eclampsia) 1.

Case report

62 years old woman, affected by hypertension, dyslipidaemia, immune thrombocytopenia (ITP) treated with Eltrombopag, came to our hospital because of pain and necrosis of the I and II right foot finger since two months. At the same time, she experienced a transient loss of consciousness, studied with cerebral MRI, with no pathological findings. Ecocolordoppler did not show any obstructive artery diseases in abdominal aorta and lower limbs arteries. Echocardiography, abdomen US, chest X-Ray, and gynaecological evaluation were normal. Nail fold capillaroscopy showed presence of abnormally shaped capillaries (“bush” shaped capillaries) and two mega capillaries. Ant phospholipid testing was positive for LAC, anticardiolipin, and anti-beta 2 glycoprotein I IgG, without any other autoantibodies. Diagnosis of APS was made. The patient began treatment with steroids, VKA, and iloprost, with improvement of clinical manifestations and lowering of pain.

Discussion

APS can be primitive or secondary, when associated to other autoimmune diseases. In this case report, thrombocytopenia could be a manifestation of APS.

Bibliography

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