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Asymmetrical erythromelalgia as presentation of polycythaemia vera

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Description

89-year-old white woman referred pain in the left foot associated with a burning sensation of 1-month duration. The patient's medical history indicated acute myocardial infarction at the age of 87 and a transient ischemic attack last year. Physical examination revealed erythema, mild oedema, and slight warm left foot (Figure 1) and both feet with skin changes resulting from chronic venous insufficiency. The investigation revealed polycythaemia (erythrocytes 6.44 x 10¹²/L, haemoglobin 16.1 g/dL, haematocrit 52.2%), normal leukocytes 9.9 x 10°/L, thrombocytosis (platelets 543 x 10⁹/L), low erythropoietin (2.3 mUI/mL) and normal ferritin (84 ng/mL). Renal function, liver enzymes, urinalysis, thyroid function, and blood smear were normal. Doppler evaluation and myelogram had no abnormalities. The JAK2V617 mutation search was positive with an allelic charge of 49%. A diagnosis of polycythaemia vera was done. She initiated treatment with 100 mg of acetylsalicylic acid and 500 mg of hydroxyurea daily with symptom relief, keeping follow-up at the haematologist.



Figure 1: Erythromelalgia of left foot.

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Declarations

Conflict of interest: None.

Authorship contributions

Conception and design of study: Guilherme Camões; Carlos Silva.

Acquisition of data: Guilherme Camões; Carlos Silva.

Analysis and/or interpretation of data: Guilherme Camões; Carlos Silva.

Drafting the manuscript: Guilherme Camões; Carlos Silva.

Revising the manuscript critically for important intellectual content: Arsénio Santos; Armando Carvalho.

Approval of the version of the manuscript to be published: Guilherme Camões; Carlos Silva; Arsénio Santos; Armando Carvalho.

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