Cheilitis. It tends to occur in the hands and feet, joints, intertrigo, and mucocutaneous junctions.

C. Enanthema

An enanthema is a lesion of the mucous membranes, such as the oral mucosa, conjunctiva and external genitalia. Specific types are listed below.

1. Aphtha

An aphtha is a painful, sharply circumscribed, round erosion with a diameter of 1 cm or less in the mucous membrane (Fig. 4.25). It is accompanied by peripheral inflammatory flush. Healing is without scarring. Deep ulcers are not included in aphtha. Major diseases that cause aphtha are viral infections (e.g., herpes simplex, varicella, hand-foot-and-mouth disease) and Behçet’s disease.

2. Leukoplakia

Leukoplakia is abnormal keratinization of the mucosal epithelium. It appears white (Fig. 4.26) and may be benign or precancerous (Chapter 22).

D. Lesions with elevation of skin

1. Lichen

Lichens are multiple aggregated papules of 5 mm or less in diameter that persist longer than one month without progressing to another type of lesion (Fig. 4.27). Lichens are classified into lichen planus, lichen nitidus, lichen pilaris, lichen spinulosus, lichen amyloidosus, lichen sclerosus et atrophicus, lichen myxedematosus, lichen scorpiolosorum and lichen striatus. Atypical lichen-like skin lesions are called lichenoid eruptions.

2. Lichenification

Lichenification is the thickening and hardening of skin that results from chronic disease. The sulci cutis and cristae cutis are clearly observed (Fig. 4.28). Lichenification is found in chronic eczema, lichen simplex chronicus and atopic dermatitis.
3. Plaque

A plaque is a broad, flat, elevated skin lesion with a diameter of 2 cm to 3 cm, sometimes more (Fig. 4.29). It presents as flat or papillomatous, according to the type of elevation; moreover, the shape is described as round, oval, atypical or circular. These descriptions are useful not only for individual lesions with a flat elevation, but also for flat, elevated lesions of aggregated fused papules.

4. Papilloma

A papilloma is a papillary tumor that is covered by epidermis and mucosal epithelium. Connective tissue containing capillaries is present. Since it is protrusive, papilloma is susceptible to injury and infection.

Elevated lesions on the glandular epithelium are usually called polyps.

5. Condyloma

A condyloma is an aggregation of soft nodules with a papillary or granular surface (Fig. 4.30). It is mostly seen in the mucous membranes, such as those of the external genitalia. Typical condylomas are condyloma acuminatum caused by human papilloma virus (HPV; Chapter 23), and condyloma lata (caused by syphilis; Chapter 27).

E. Lesions associated with hair follicles

1. Acne

Acne is an inflammatory change, such as an erythema or pustule, at a hair follicle (Fig. 4.31). It is usually accompanied by
black-headed papules (comedos). It frequently occurs in seborrheic zones of the skin. The term acne usually refers to acne vulgaris; other types of acne are oil acne, iodine acne (the follicle is blocked by iodine secreted after chronic ingestion of iodine) and steroid acne (from prolonged chronic use of topical and systemic corticosteroids) (Chapter 19).

2. Comedo

A comedo is a black-headed papule that results from the blockage of a hair follicle by sebum (Fig. 4.32). The hair follicle at a site with a comedo is open. A plaque of multiple aggregated comedos on the face is Favre-Racouchot disease.

3. Sycosis

Sycosis is the formation of a nodule or pustule in a hair follicle, found as a plaque at sites with terminal hair (Fig. 4.33). The main types are sycosis vulgaris and sycosis trichophytica.

F. Lesions with color changes

1. Erythroderma, Erythrodermia

Erythroderma (erythrodermia) is the condition in which the skin has a systemic flush on more than 90% of the body surface (Fig. 4.34). Often accompanied by scaling, erythroderma may also be called exfoliative dermatitis (Chapter 9).

2. Melanosis

Melanosis is large, vaguely margined pigmentation, including Riehl’s melanosis and friction melanosis (Chapter 16).

3. Livedo (livedo reticularis)

Livedo is a large network of reddish lesions caused by hypotonicity of the venous network and overactivity of the arterial network in the junction of the dermis and subcutaneous fat tissues (Figs. 4.35-1 and 4.35-2). Livedo is mainly classified as cutis marmorata (physiologic livedo reticularis), idiopathic and
primary livedo reticularis, and secondary livedo reticularis.

The most frequent type, cutis marmorata, occurs as a rosy network of persistent erythema in a shape of a closed ring, mostly in the knees. It is mainly caused by cold and is often seen in otherwise normal women and children. It tends to disappear when the outside air temperature rises, without leaving pigmentation, or when pressed by glass (diascopy).

Idiopathic and primary livedo reticularis occurs in the extremities as peach bloom dendritic persistent erythema in the shape of an open ring. It tends to accompany systemic organic changes such as vasculitis.

Herpes is a lesion in which there are aggregated vesicles and small pustules (Fig. 4.36). Presently the term usually refers to herpes simplex or herpes zoster, which are infections caused by the herpes virus. In other cases, herpes may be observed as lesions of vesicle aggregation, such as in Duhring dermatitis herpetiformis and herpes gestationis. Aggregated pustules are found in pustular psoriasis and pustulosis palmaris et plantaris (PPP).

Pemphigus produces acantholysis in the epidermis. The mechanism is autoimmune. The typical types are pemphigus vulgaris, pemphigus vegetans, pemphigus foliaceus and pemphigus erythematosus (Chapter 14). Bullous pemphigoid and dermatitis herpetiformis are considered to be separate diseases; they are excluded from the category of pemphigus.

Impetigo is a combination of pustules and crust, which may be accompanied by erythema and small blisters (Fig. 4.37). Impetigo contagiosa and bacterial dermatitis are typical of impetigo (Chapter 23).

Pityriasis is characterized by fine scaling caused by abnormal keratinization (Fig. 4.38). It includes pityriasis rosea (Gilbert),
pityriasis simplex and pityriasis circinata.

2. **Xerosis**

Xerosis is dry skin whose surface is rough and muddy. It is caused by diminished secretion of sebum and perspiration. Pityroidal scales and shallow cracks may develop, giving an ichthyosis-like appearance and mild itching. Hereditary xeroderma pigmentosum and secondary xeroderma, both of which occur after the onset of a preexisting eruption, are included in xerosis (Chapters 13 and 19).

3. **Ichthyosis**

Ichthyosis is thin dry scaling on the skin that resembles glued-on fish scales (Fig. 4.39). Various types of ichthyoses are known, including congenital and acquired (Chapter 15).

### I. Lesions accompanied by other changes

1. **Poikiloderma**

Poikiloderma is a lesion that shows the combined features of atrophoderma, pigmentation, depigmentation and telangiectasia (Fig. 4.40). It is often observed at the terminal stages of various lesions. Poikiloderma occurs in dermatomyositis, scleroderma, systemic lupus erythematosus (SLE), mycosis fungoides, chronic radiodermatitis and xeroderma pigmentosum. Congenital poikiloderma is called poikiloderma congenitale (Chapter 18).

2. **Sclerosis**

Sclerosis is thickening of the skin caused by proliferation of connective tissues such as collagen and extracellular matrix (Fig. 4.41). It is found in scleroderma, scleredema adultorum and scleromyxoedema. Pathologically, the number of fibroblasts decreases, and collagen fibers become swollen or uniform in size.

3. **Seborrhea**

Seborrhea is a condition in which sebum accumulates on the skin surface in great amounts, as a result of increased secretion. This tends to lead to bacterial infection, acne, eczema infantile and seborrheic dermatitis (Chapter 7); however, seborrhea itself...
does not present inflammatory symptoms. Sites that are densely distributed with sebaceous glands, such as the head, face, precordial region, center of the back, armpits and external genitalia are called seborrheic zones.

The severity depends greatly on genetic factors and predisposition. Androgens are known to enhance sebum discharge. Physiologically, seborrhea occurs in newborn infants and in adults from adolescence.

4. Alopecia

Alopecia is a condition in which hair grows sparsely or not at all (Fig. 4.42). The major types of alopecia are alopecia areata, alopecia totalis, alopecia universalis and ophiasis.

5. Pruritus

Pruritus is itching without eruptions. Pruritus is also called pruritus cutaneous, and it may occur secondarily in various systemic disorders and local lesions, such as urogenital diseases (Chapter 8).