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Reply

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Key Words

Juvenile xanthogranuloma • Dermoscopy, vascular pattern

We thank Rubegni et al. for highlighting the importance of good dermoscopic technique including applying variable vertical pressure to maximise the diagnostic yield, particularly when looking for vascular structures. By using this technique, in the series that we published, no vascular structures were identified in the first 2 cases; however in case 3, the vascular pattern that Rubegni et al. describe was present. As this was a solitary finding and not a constant feature in our series, it was not commented upon further. Rubegni et al. emphasise the presence of this vascular pattern in all juvenile xanthogranuloma (JXG) cases; however, we disagree that this vascular pattern in JXG is constant; moreover, it is yet to be fully described and at present is variable, highlighted by this further case of JXG showing discrete patchy vascular structures. Thus we propose that in dermal lesions, such as JXG where the clinical presentation is variable, from plaques to papules to papulonodules, the vascular pattern may also be variable (fig. 1). Further studies involving larger numbers of cases will help to elucidate the dominant vascular pattern from non-dominant vascular patterns seen in JXG.

Color version available online

Fig. 1. A 32-year-old gentleman presented with a 12-month history of an asymptomatic slowly enlarging orange papule in the centre of his right eyebrow. Histology confirmed JXG. Heine Delta 20. Original magnification $\times 10$.

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